


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000009317		
1. Entity Name LAKE JUNE DEVELOPMENT, LLC		

Principal Place of Business 1335 EAST WEKIVA TRAIL LONGWOOD, FL 32779	Mailing Address 1335 EAST WEKIVA TRAIL LONGWOOD, FL 32779
---	---

DO NOT WRITE IN THIS SPACE

FILED
05 MAY -4 PM 6:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Reborn MAY 12 2005



01272005No Chg-LLC CR2E083 (10/03)

4. FEI Number 41-2108492	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SO, KYUNGHO
1335 EAST WEKIVA TRAIL
LONGWOOD, FL 32779

DO NOT WRITE
IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

700054696097
05/17/05--01080--030 **50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SO, KYUNGHO 1335 EAST WEKIVA TRAIL LONGWOOD, FL 32779
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **4/20/05 (01)234-9902**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #