

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029145

Entity Name: LUCAS PLACE II, LLC

FILED  
May 14, 2012  
Secretary of State

**Current Principal Place of Business:**

797 STATE ROAD 434  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

3505 S. ORLANDO DR.  
SANFORD, FL 32773 US

**New Mailing Address:**

FEI Number: 13-4266215

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEMETREE, MATTHEW C SR.  
797 STATE ROAD 434  
ALTAMONTE SPRINGS, FL 32714 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DEMETREE, DAVID A II  
Address: 797 STATE ROAD 434  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM  
Name: DEMETREE, ROBERT A  
Address: 797 STATE ROAD 434  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM  
Name: DEMETREE, MATTHEW C  
Address: 797 STATE ROAD 434  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: MATTHEW C. DEMETREE SR.

MGRM

05/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date