2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 23, 2006 8:00 am Secretary of State

DOCUMENT # L03000041509 1. Entity Name SAND LAKE LEASING, LLC							~	01-23-2006	5 90227 0	13 ****50.	00
Principal Place of Business 9350 TURKEY LAKE ROAD ORLANDO, FL 32819 US			Mailing Address 815 HERNDON AVE. ORLANDO, FL 32803								
OKDANDO, FI	L 32019	03	OKLANDO, FL 32003						2001 2011 DISBI	MINI NIMI PAMI IP	18 R 111 18 R
2. Principal Place of Business			3. Mailing Address 813 Uinekind Aye No.								
Suite, Apt. #, etc.			Suite, Apt. #, etc. PmB 408				01062006	Chg-LLC	CR2E	E083 (11/05)	
City & State			City & State Oclando Fl				4. FEI Numbe				plied For at Applicable
Zip	Country		Zip Cour 3282/ 000		itry	•	5. Certificate of Status Desired		d 🗇	\$5.00 Additional Fee Required	
	6. Name	and Address of Current F			0		7. Name and	Address of Nev	v Registered	i Agent	
DEAN ME			Name								
800 N. MA ORLANDO		Street Address (P.O.				er is Not Accepta	ıble)				
					City			<u> </u>	F	Zip Cod	0
8. The above	named entit	ty submits this statement for	the purpose of changing its	registere	ed office o	r register	ed agent, or bot	h, in the State of	•	-	1
the obligat	ions of regis	•									
	Signature, typed	d or printed name of registered agent a	nd title if applicable. (NOTE	: flegistere	d Agent signat	ture required	when reinstating)		DATE		
							Make check payable to Florida Department of State				
Fi D	iling Fee ue by Ma	is \$50.00 y 1, 2006									e
9.	ue by Ma	is \$50.00 y 1, 2006 MANAGING MEMBER		10.			2 m	Flor	ida Depart	ment of State	
9. TITLE	MGRM	y 1, 2006 MANAGING MEMBER	RS/MANAGERS	TITLE	E F	mG#	am ak, Robe	Flor	ida Depart	ment of State	Addition
9.	MGRM POZNIAK	y 1, 2006		TITLE	e e e:et address	MGF Hosni SO49	RM Jak. Robe Latrobe	ADDITION ADD	ida Depart	ment of State	
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indicated on this report is true, and socurate and that my signature shall have the samptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true, and socurate 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:

AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRI

1/16/06

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