

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000047992

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** ELM AVENUE APARTMENTS, LLC

**Current Principal Place of Business:**

411 STARR RIDGE LOOP  
LAKE WALES, FL 33898

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2326  
LAKE WALES, FL 33859

**New Mailing Address:**

411 STARR RIDGE LOOP  
LAKE WALES, FL 33898

**FEI Number:** 20-0451903

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZUKOWSKI, STEPHEN E  
411 STARR RIDGE LOOP  
LAKE WALES, FL 33898 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:** ZUKOWSKI, STEPHEN E  
**Address:** 411 STARR RIDGE LOOP  
**City-St-Zip:** LAKE WALES, FL 33898

**Title:** MGRM  
**Name:** ZUKOWSKI, EDWARD A  
**Address:** 411 STARR RIDGE LOOP  
**City-St-Zip:** LAKE WALES, FL 33898

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:** EDWARD A. ZUKOWSKI

MGRM

04/22/2010

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