

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055829

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: LAKEFRONT PARTNERS, L.L.C.

## Current Principal Place of Business:

2221 SPRING LAKE CIRCLE  
ST. CLOUD, FL 34771

## New Principal Place of Business:

5600 EAST IRLO BRONSON MEMORIAL HIGHWAY  
ST. CLOUD, FL 34771

## Current Mailing Address:

2221 SPRING LAKE CIRCLE  
ST. CLOUD, FL 34771

## New Mailing Address:

5600 EAST IRLO BRONSON MEMORIAL HIGHWAY  
ST. CLOUD, FL 34771

FEI Number: 20-0809477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TER BEEK, THOMAS A  
2221 SPRING LAKE CIRCLE  
ST. CLOUD, FL 34771 US

## Name and Address of New Registered Agent:

BAUKNIGHT, JAMES H  
5600 EAST IRLO BRONSON MEMORIAL HIGHWAY  
ST. CLOUD, FL 34771 US

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: JAMES H. BAUKNIGHT

04/14/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: TER BEEK, THOMAS A  
Address: 2221 SPRING LAKE CIRCLE  
City-St-Zip: ST. CLOUD, FL 34771

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BAUKNIGHT, JAMES H  
Address: 5600 EAST IRLO BRONSON MEMORIAL HIGHWAY  
City-St-Zip: ST. CLOUD, FL 34771

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JAMES H. BAUKNIGHT

MR.

04/14/2008

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