

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056311

FILED
Apr 20, 2009
Secretary of State

Entity Name: LEE BOULEVARD OFFICE RETAIL LLC

Current Principal Place of Business:

18191 PARKRIDGE CIR
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

18191 PARKRIDGE CIR
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 52-2418395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOKER, ROSS
18191 PARKRIDGE CIR
FORT MYERS, FL 33908 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 () Delete
Name: RAFFEL, SPENCER
Address: P.O. BOX 152347
City-St-Zip: CAPE CORAL, FL 33915

Title: MGRM () Delete
Name: MOSHER, ROBERT
Address: 14770 SOARING EAGLE CT
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: GARCZYNSKI, STANELY
Address: 14565 EAGLE RIDGE DR
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: HOOKER, ROSS
Address: 18191 PARKRIDGE CIR
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: GARCZYNSKI, STANLEY
Address: 14565 EAGLE RIDGE DR
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STANLEY GARCZYNSKI

MGRM

04/20/2009

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