

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000030790

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Entity Name:** LAKE PROPERTY VENTURES, LLC

**Current Principal Place of Business:**

601 EAST DIXIE AVENUE  
MEDICAL PLAZA #401  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

601 EAST DIXIE AVENUE  
MEDICAL PLAZA #401  
LEESBURG, FL 34748 US

**New Mailing Address:**

**FEI Number:** 74-3119969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOFFETT, ALFRED H JR.  
601 EAST DIXIE AVENUE  
MEDICAL PLAZA #401  
LEESBURG, FL 34748 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:** MGR  
**Name:** MOFFETT, ALFRED H JR.  
**Address:** 601 EAST DIXIE AVE, MEDICAL PLAZA 401  
**City-St-Zip:** LEESBURG, FL 34748 US

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:** ALFRED H. MOFFETT, JR., MD

MGR

01/03/2012

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