

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031211

**FILED**  
**Apr 19, 2005**  
**Secretary of State**

**Entity Name:** LAKE ARTHUR ESTATES DEVELOPMENT COMPANY, LLC

**Current Principal Place of Business:**

6488 HIGHWAY 85, NORTH  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

6488 HIGHWAY 85, NORTH  
CRESTVIEW, FL 32536

**New Mailing Address:**

FEI Number: 20-0975769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAILEY, WILLIAM A  
6488 HIGHWAY 85, NORTH  
CRESTVIEW, FL 32536 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BAILEY, WILLIAM A  
Address: 6488 HIGHWAY 85, NORTH  
City-St-Zip: CRESTVIEW, FL 32536

Title: MGR ( ) Delete  
Name: BAILEY, BETTY W  
Address: 6488 HIGHWAY 85, NORTH  
City-St-Zip: CRESTVIEW, FL 32536

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM A. BAILEY

MGRM

04/19/2005

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