

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054168

Entity Name: LAKEVIEW CONSTRUCTION LLC

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

1205 N. NORTHLAKE DRIVE
HOLLYWOOD, FL 33019 US

New Principal Place of Business:

Current Mailing Address:

1205 N. NORTHLAKE DRIVE
HOLLYWOOD, FL 33019 US

New Mailing Address:

FEI Number: 20-1395208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FORM-A-CORP, INC
100 VILLAGE SQUARE CROSSING
SUITE 103
PALM BEACH GARDENS, FL 33410 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: TUFANO, BARBARA
Address: 1205 N. NORTHLAKE DRIVE
City-St-Zip: HOLLYWOOD, FL 33019 US

Title: MGRM () Delete
Name: TUFANO, CARMINE
Address: 1205 N NORTH LAKE DR
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGRM () Delete
Name: TUFANO, CARMINE III
Address: 421 SW 3RD STREET
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: TUFANO, CARMINE III
Address: 421 SW 3RD STREET
City-St-Zip: HALLANDALE BEACH, FL 33009

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: BARBARA TUFANO

MGRM

01/14/2009

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