

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091654

FILED  
Apr 07, 2005  
Secretary of State

Entity Name: TWIN LAKE PROPERTIES, LLC

**Current Principal Place of Business:**

PMB 429, UNIT #104  
4044 WEST LAKE MARY BLVD.  
LAKE MARY, FL 327462012

**New Principal Place of Business:**

**Current Mailing Address:**

PMB 429, UNIT #104  
4044 WEST LAKE MARY BLVD.  
LAKE MARY, FL 327462012

**New Mailing Address:**

FEI Number: 20-2206743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KELLEY, CHRISTOPHER E  
601 WEST SEMINOLE BLVD.  
SANFORD, FL 32771 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: KELLEY, CHRISTOPHER E MGR.  
Address: PMB #429, 4044 W. LAKE MARY BLVD., #104  
City-St-Zip: LAKE MARY, FL 327462012

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: CHRISTOPHER E. KELLEY

MGR.

04/07/2005

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