

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 15, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000016245

1. Entity Name
LAKE COMMERCE CENTER, LLC



Principal Place of Business
**1980 N ATLANTIC AVENUE, STE 801
COCOA BEACH, FL 32931 US**

Mailing Address
**1980 N. ATLANTIC AVENUE, STE 801
ATTN: JOHN J. KABBOORD, JR.
COCOA BEACH, FL 32931 US**



02062007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3012076

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KABBOORD, JOHN J JR.
1980 N. ATLANTIC AVENUE
SUITE 801
COCOA BEACH, FL 32931**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007.**

U00000637037
02/26/07-80045-003 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LAKE COMMERCE DEVELOPMENT, INC.
STREET ADDRESS	1980 N. ATLANTIC AVE., SUITE 801
CITY-ST-ZIP	COCOA BEACH, FL 32931
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

LAKE COMM DEV, INC; PRESIDENT

2/7/07 407.832.4077