

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019173

Entity Name: LAKEPAR LLC

FILED  
Jan 05, 2007  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 691985  
ORLANDO, FL 328191985

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 691985  
ORLANDO, FL 328191985

**New Mailing Address:**

FEI Number: 42-1660863

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KHAN, NISHAD A  
SEMPER WOODS, P.A.  
425 WEST COLONIAL DRIVE, SUITE 204  
ORLANDO, FL 32804 US

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

PAUL, DULFER A  
10870 BAYSHORE DRIVE  
WINDERMERE, FL 34786 US

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: PAUL DULFER

01/05/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DULFER, PAUL  
Address: P.O. BOX 691985  
City-St-Zip: ORLANDO, FL 328191985

Title: MGR ( ) Delete  
Name: BOST, DAVID  
Address: P.O. BOX 691985  
City-St-Zip: ORLANDO, FL 328191985

**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 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: PAUL DULFER

MR.

01/05/2007

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