

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020415

FILED
Mar 21, 2008
Secretary of State

Entity Name: LANTERN PROPERTY SERVICES GROUP LLC

Current Principal Place of Business:

1220 LEEWAY AVENUE
ORLANDO, FL 32810

New Principal Place of Business:

3929 KNOTT DRIVE
APOPKA, FL 32712

Current Mailing Address:

1220 LEEWAY AVENUE
ORLANDO, FL 32810

New Mailing Address:

3939 KNOTT DRIVE
APOPKA, FL 32712

FEI Number: 20-5720388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POYSER, PATRICIA A
1220 LEEWAY AVENUE
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

POYSER, PATRICIA A
3939 KNOTT DRIVE
APOPKA, FL 32712 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:

03/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: POYSER, PATRICIA A
Address: 8001 PLUNKETT AVENUE
City-St-Zip: ORLANDO, FL 32810

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POYSER, PATRICIA A
Address: 3929 KNOTT DRIVE
City-St-Zip: APOPKA, FL 32712

Title: MGR () Change (X) Addition
Name: POYSER, RONALD S
Address: 3939 KNOTT DRIVE
City-St-Zip: APOPKA, FL 32712

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: PATRICIA POYSER

MGR

03/21/2008

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