

FILED
Jun 07, 2007 8:00 am
Secretary of State

04-16-2007 90350 034 ****50.00

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000093223			
1. Entity Name LAMBERT PROPERTIES OF FLORIDA, LLC			
Principal Place of Business 304 DORIS DRIVE LAKELAND, FL 33813		Mailing Address 304 DORIS DRIVE LAKELAND, FL 33813	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Subs. Apt. #, etc.		Subs. Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-3635789		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent HALLOO, DAVID O JR ONE LAKE MORTON DRIVE LAKELAND, FL 32801		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 of officer named in registered agent and state capitalization. (NOTE: Registered agent signature required when submitting)			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP LAMBERT, TIM J 304 DORIS DRIVE LAKELAND, FL 33813	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption 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 506, Florida Statutes.			
SIGNATURE: 		Date: 4/6/07 863-647-2291	

See correction
above

RECEIVED
JUN 04 2007

BY:.....