

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000098250

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** ISLAND PARK CENTER, LLC

**Current Principal Place of Business:**

13379 MCGREGOR BOULEVARD  
ONE  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

13379 MCGREGOR BOULEVARD  
ONE  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 35-2262953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LUCAS, DONALD R  
13379 MCGREGOR BOULEVARD  
ONE  
FORT MYERS, FL 33919 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/MANAGERS:**

**Title:** MGRM  
**Name:** LUCAS, DON  
**Address:** 13379 MCGREGOR BLVD., SUITE ONE  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** MGRM  
**Name:** PB ISLAND PARK, LLC  
**Address:** P.O. BOX 07132  
**City-St-Zip:** FORT MYERS, FL 33919

I hereby 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:** DONALD R. LUCAS

MGRM

04/05/2010

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