

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90401 016 ***138.75

DOCUMENT # L05000099652

1. Entity Name
GEORGETOWNE LAKE, LLC



Principal Place of Business
1600 BIG TREE RD.
SO DAYTONA, FL 32119

Mailing Address
P.O. BOX 731259
ORMOND BEACH, FL 32173

60011935



01092008 No Chg-LLC

CR2EC83 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3610766

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSE, JAMES L ESQ
222 SEABREEZE BLVD
DAYTONA BEACH, FL 32116

**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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME O'DWYER, BRIAN
STREET ADDRESS 1530 C.R. 2009
CITY- ST- ZIP BUNNELL, FL 32110

TITLE MGR
NAME O'DWYER, WILLIAM
STREET ADDRESS 1530 C.R. 2009
CITY- ST- ZIP BUNNELL, FL 32110

TITLE MGR
NAME O'DWYER, STEPHEN
STREET ADDRESS 1530 C.R. 2009
CITY- ST- ZIP BUNNELL, FL 32110

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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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

2-26-08

Date

386-671-6991

Daytime Phone #