

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059974

Entity Name: LILLIAN PARK, LLC

FILED  
Sep 06, 2008  
Secretary of State

## Current Principal Place of Business:

13700-2 SIX MILE CYPRESS  
FORT MYERS, FL 33912

## New Principal Place of Business:

2355 RADER DRIVE  
LAND O LAKES, FL 34639

## Current Mailing Address:

13700-2 SIX MILE CYPRESS  
FORT MYERS, FL 33912

## New Mailing Address:

2355 RADER DRIVE  
LAND O LAKES, FL 34639

FEI Number: 20-5020230      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

R&A AGENTS, INC.  
2320 FIRST STREET STE 1000  
FORT MYERS, FL 33901      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: MGR      ( ) Delete  
Name: ROSE EAGLE DEVELOPME, NT, LLC  
Address: 13700-2 SIX MILE CYPRESS  
City-St-Zip: FORT MYERS, FL 33912

Title: MGR      ( ) Delete  
Name: HME COMMERCIAL DEVEL, OPMENT, INC.  
Address: 2355 RADER DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

## ADDITIONS/CHANGES:

Title: MGR      (X) Change ( ) Addition  
Name: ROSE EAGLE DEVELOPME, NT, LLC  
Address: 6517 HIGHCROFT DR  
City-St-Zip: NAPLES, FL 34119

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT R LUCAS

MGR

09/06/2008

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