

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000098043

**FILED**  
**Sep 30, 2010**  
**Secretary of State**

**Entity Name:** LAKE COUNTY LAND TRUST LLC.

**Current Principal Place of Business:**

4127 NORTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 783636  
WINTER GARDEN, FL 347783636

**New Mailing Address:**

**FEI Number:** 77-0682505

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAYROBINSON, P.A.  
301 EAST PINE STREET STE 1400  
ORLANDO, FL 32801 US

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

GRAY ROBINSON, P.A.  
301 EAST PINE STREET STE 1400  
ORLANDO, FL 32801 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: LORI NASSOFER CO MICHAEL CLIFFORD

09/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NASSOFER, LORRIE  
Address: 4127 NORTH ORANGE BLOSSOM DRIVE  
City-St-Zip: ORLANDO, FL 32804

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: LORRIE NASSOFER

MGR

09/30/2010

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