

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119903

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: LAKE BURDEN INVESTMENTS, LLC

**Current Principal Place of Business:**

7932 W. SAND LAKE ROAD, SUITE 102  
ORLANDO, FL 32819

**New Principal Place of Business:**

7932 W. SAND LAKE ROAD  
102  
ORLANDO, FL 32819

**Current Mailing Address:**

7932 W. SAND LAKE ROAD, SUITE 102  
ORLANDO, FL 32819

**New Mailing Address:**

7932 W. SAND LAKE ROAD  
102  
ORLANDO, FL 32819

FEI Number: 20-8255787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PAGUE, CHRISTINA M ESQ.  
7232 SAND LAKE ROAD, SUITE 204  
ORLANDO, FL 32819 US

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

PAGE, CHRISTINA M ESQ.  
7232 SAND LAKE ROAD, SUITE 204  
ORLANDO, FL 32819 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: CHRISTINA PAGE

01/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PHOENICIA CASA INVES, TMENTS, LLC  
Address: 7932 W. SAND LAKE ROAD, SUITE 102  
City-St-Zip: ORLANDO, FL 32819

Title: MGR ( ) Delete  
Name: HARVEY, TOM G  
Address: 8803 LAKE MABLE DRIVE  
City-St-Zip: ORLANDO, FL 32836

**ADDITIONS/CHANGES:**

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

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: TOM HARB

MGR

01/16/2009

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