

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000049070

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** LAKE FOREST UTILITY, LLC

**Current Principal Place of Business:**

5731 BEE RIDGE ROAD  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

1645 W. MAIN STREET  
INVERNESS, FL 34450

**New Mailing Address:**

P. O. BOX 1798  
LAKELAND, FL 33840

**FEI Number:** 80-0226860

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMALLRIDGE, MIKE  
1645 W. MAIN STREET  
INVERNESS, FL 34450 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:** SMALLRIDGE, MIKE  
**Address:** 1645 W. MAIN STREET  
**City-St-Zip:** INVERNESS, FL 34450

**Title:** MGRM  
**Name:** SCHWANER, CHARLES  
**Address:** 5731 BEE RIDGE ROAD  
**City-St-Zip:** SARASOTA, FL 34233

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:** MIKE SMALLRIDGE

MGR

04/26/2012

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