

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000068587

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** LC3 PROPERTY HOLDINGS, LLC

**Current Principal Place of Business:**

2725 ROBIE AVENUE  
MOUNT DORA, FL 327579619 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 74  
MOUNT DORA, FL 32756

**New Mailing Address:**

P O BOX 857  
MOUNT DORA, FL 32756

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHIPLEY LAW FIRM  
131 WATERMAN AVENUE  
MOUNT DORA, FL 327579541 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: LIFE CHANGING CHRISTIAN CENTER INTL INC  
Address: 2725 ROBIE AVE  
City-St-Zip: MOUNT DORA, FL 327576707

Title: MGR  
Name: DURHAM, RHONDA S  
Address: 2725 ROBIE AVENUE  
City-St-Zip: MOUNT DORA, FL 327579619 US

Title: MGR  
Name: SIMONS, PAMELA  
Address: 2725 ROBIE AVENUE  
City-St-Zip: MOUNT DORA, FL 327579619 US

Title: MGR  
Name: PETERS, ROY C  
Address: 2725 ROBIE AVENUE  
City-St-Zip: MOUNT DORA, FL 327579619 US

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: PAMELA SIMONS

MGR

04/27/2010

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