

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000086299

**FILED**  
**Mar 23, 2010**  
**Secretary of State**

**Entity Name:** WINTER PARK RAVENS LACROSSE, LLC

**Current Principal Place of Business:**

958 SOUTH LAKEMONT AVENUE  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

958 SOUTH LAKEMONT AVENUE  
WINTER PARK, FL 32792

**New Mailing Address:**

**FEI Number:** 26-3332475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLLINGSHEAD, JONATHAN C  
20 NORTH ORANGE AVENUE  
1500  
ORLANDO, FL 32801 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:** SMITH, JEREMY  
**Address:** 958 S. LAKEMONT AVENUE  
**City-St-Zip:** WINTER PARK, FL 32792

**Title:** MGRM  
**Name:** GALLO, MICHAEL  
**Address:** 200 ST. ANDREWS BOULEVARD UNIT #510  
**City-St-Zip:** WINTER PARK, FL 32792

**Title:** MGRM  
**Name:** SINCLAIR, ANDREW  
**Address:** 690 OSCEOLA AVE UNIT 407  
**City-St-Zip:** WINTER PARK, FL 32789

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:** JEREMY SMITH

MGRM

03/23/2010

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