

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000090303

FILED  
May 02, 2010  
Secretary of State

**Entity Name:** LAKE WASHINGTON MITIGATION BANK, LLC

**Current Principal Place of Business:**

1245 W. FAIRBANKS AVENUE, SUITE 301  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

1245 W. FAIRBANKS AVENUE, SUITE 301  
WINTER PARK, FL 32789

**New Mailing Address:**

FEI Number: 26-4766051      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

DEAN MEAD SERVICES, LLC  
800 NORTH MAGNOLIA AVE., SUITE 1500  
ORLANDO, FL 32803 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: MGR  
Name: SPILLANE, JACK E  
Address: 1245 W. FAIRBANKS AVE., SUITE 301  
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM  
Name: KOSC, MONIKA  
Address: 1245 W. FAIRBANKS AVE. SUITE 301  
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: MONIKA KOSC

MGRM

05/02/2010

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