

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000107345

Entity Name: FISHER/LAKESIDE L.L.C.

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

4801 PGA BOULEVARD  
PALM BEACH GARDENS, FL 33418 US

**New Principal Place of Business:**

**Current Mailing Address:**

4801 PGA BOULEVARD  
PALM BEACH GARDENS, FL 33418 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

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

CUMMINGS, PETER D  
4801 PGA BLVD  
PALM BEACH GARDENS, FL 33418 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: PETER D. CUMMINGS 04/28/2009  
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MARTINIQUE MANAGER, INC.  
Address: 4801 PGA BOULEVARD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CUMMINGS, PETER D  
Address: 4801 PGA BOULEVARD  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: PETER D. CUMMINGS MGR 04/28/2009  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date