

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000067973

Entity Name: L.A. LITES L.L.C.

**FILED**  
**May 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

909 LAKE LINDLEY DR N  
DELAND, FL 32724

**New Principal Place of Business:**

**Current Mailing Address:**

909 LAKE LINDLEY DR N  
DELAND, FL 32724

**New Mailing Address:**

FEI Number: 27-0585533      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

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

BEST, LEVESTER A JR  
909 LAKE LINDLEY DR N  
DELAND, FL 32724      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BEST, LEVESTER A JR.  
Address: 909 LAKE LINDLEY DR N  
City-St-Zip: DELAND, FL 32724

Title: MGRM  
Name: BEST, DIANE M  
Address: 909 LAKE LINDLEY DR N  
City-St-Zip: DELAND, FL 32724

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: LEVESTER A. BEST JR.

MGR

05/01/2010

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