

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000118410

Entity Name: LAKE WESTON GP, LLC

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5025 SOUTH U.S. HIGHWAY 17/92  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

5025 SOUTH U.S. HIGHWAY 17/92  
CASSELBERRY, FL 32707

**New Mailing Address:**

FEI Number: 87-0696367

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COSTOLO, W. TERRY ESQUIRE  
GRAYROBINSON, P.A.  
301 EAST PINE STREET, SUITE 1400  
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: GP  
Name: WOOTEN, DAVID  
Address: 5025 SOUTH U.S. HIGHWAY 17/92  
City-St-Zip: CASSELBERRY, FL 32707

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: DAVID WOOTEN

GP

04/12/2011

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