

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000029447

**FILED**  
**Feb 09, 2011**  
**Secretary of State**

**Entity Name:** CSB FLORIDA OVERLOOK HOLDINGS, LLC

**Current Principal Place of Business:**

200 WEST CONGRESS STREET  
LAFAYETTE, LA 70501

**New Principal Place of Business:**

200 WEST CONGRESS STREET  
LAFAYETTE, LA 70501 US

**Current Mailing Address:**

200 WEST CONGRESS STREET  
LAFAYETTE, LA 70501

**New Mailing Address:**

5310 EAST SR 64  
BRADENTON, FL 34208 US

**FEI Number:** 27-2125893

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: IB SPE MANAGEMENT, INC.  
Address: 200 WEST CONGRESS STREET  
City-St-Zip: LAFAYETTE, LA 70501 US

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: IB SPE MANAGEMENT, INC.

MGRM

02/09/2011

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