

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000120738

Entity Name: AQUATIC LANE, LLC.

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3990 WHOLESALE CT  
UNIT 1  
NORTH FORT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

3990 WHOLESALE CT  
UNIT 1  
NORTH FORT MYERS, FL 33903

**New Mailing Address:**

FEI Number: 36-4713025

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GREER, SUSAN M  
737 VIA DEL SOL  
NORTH FORT MYERS, FL, FL 33903 US

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

GREER, SUSAN M  
737 VIA DEL SOL  
NORTH FORT MYERS, FL 33903 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

04/26/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: EGIZI, ROBERT L  
Address: 6331 ALCORN ST  
City-St-Zip: BOKEELIA, FL 33903 LE

Title: MGR  
Name: LANE, JAY R  
Address: 5882 SANDAL LN.  
City-St-Zip: BOKEELIA, FL 33922

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: ROBERT L EGIZI

MGRM

04/26/2012

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