


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
97 JUN -2 AM 7:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE \$203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company	DOCUMENT # L94000000548
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LAKE LANDS LIMITED, L.C.
P.O. BOX 491030
LEESBURG FL 34749-1030

1a. Principal Place of Business Address

2501 W. PALM STREET
SUITE 109
LEESBURG FL 34748

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business 5023 C.R. #125	2a. Mailing Address 5023 C.R. #125
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Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WILDWOOD, FL

City & State

WILDWOOD, FL

Zip

34785

Country

USA

Zip

34785

Country

USA

3. Date Organized or Qualified

10/13/1994

3a. State of Formation

FL

4. FEI Number

59-3296127

☐ Applied For

APPLIED FOR

☐ Not Applicable

5. Date of Last Report

07/29/1996

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
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BROWN, RONALD D
2501 W. PALM STREET
SUITE 109
LEESBURG FL 34748

Name

RONALD D BROWN

Street Address (P.O. Box Number is Not Acceptable)

5023 C.R. #125

Suite, Apt. #, etc.

City

WILDWOOD FL

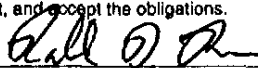
Zip Code

FL

34785

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE



RONALD D. BROWN

DATE

4-28-97

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MNGR	BROWN, RONALD D	5023 C.R. #125 WILDWOOD, FL 2501 W. PALM STREET	34785 LEESBURG FL
MNGR	MATHIAS, WILLIAM J	1608 S.R. #44	LEESBURG FL

SID00002203299-0
-06/05/97-01107-007
***103.75 ***103.75
SID00002203299-0
-06/05/97-01107-008
***100.00 ***100.00
6-3-97

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:



Ronald D Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

352 748-4840

Daytime Phone #