2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9900000140

SIGNATURE:

SIGNATURE AND TYPES OR PE

LAKE LIMO OF LAKE COUNTY, L.L.C.

] `	CONT.	f			
Principal Place of Business 321 SOUTHRIDGE INDUSTRIAL DRIVE TAVARES FL 32778		Mailing Address 321 SOUTHRIDGE INDUS TAVARES FL 32778	321 SOUTHRIDGE INDUSTRIAL DRIVE				·= • • •	•
2. Principa	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Cuite 0 at 4 at	0.75			, sasti antii antii 90111 N	.DIII BEIN \$\$101 (IE()	91901 BBS 1001
		Suite, Apt. #, etc.		☐ C+	IECK HERE IF MA	KING CHANGE	es .	
City & State		City & State	City & State		4. FEI Number 5	9-3551432		Applied For
Zip	Country	Zip	Country		5.0-47		\$5.00 A	Not Applicable
6. Name and Address of Curre		Trans De Jahren I A	<u> </u>		Fee Required			
	· · · · · · · · · · · · · · · · · · ·	Irrent Registered Agent	Nic.	ime	7. Name and Addre	ss of New Registe	red Agent	· .
	VERTEL, JEFFREY A		INA	irrie				
	1 SOUTHRIDGE INDUSTRIAL D	PRIVE	Street Address		s (P.O. Box Number is Not Acceptable)			
IA	VARES FL 32778		ļ	<u> </u>				
			Cit	-		İ	FL Zip Co	
The above the obline	e named entity submits this statem ations of registered agent.	ent for the purpose of changing it	s registered offi	ice or register	ed agent, or both, in the	State of Florida. I	am familiar with	and accept
0090	ations of registered agent.							, — с шоор.
SIGNATURE	Signature, typed or printed name of registered	acent and tills if nonfinition						
			TE: Registered Agent		when reinstating)	DA	JE	
		FILE N	IOW!!! FEE	IS \$50.00				
		Make Check Payab	ole to Florida	Departmer	nt of State			
			ie By May 1,	2003				
9.	MANAGING ME	MBERS/MANAGERS	10.		A	DDITIONS/CHANG	GES	
TITLE NAME	HAERTEL, JEFFREY A	☐ Delete	TITLE				☐ Change	☐ Addition
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CITY-ST-ZIP

EMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

11. I 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 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.

FILED Jan 10, 2003 8:00 am Secretary of State 01-10-2003 90003 008 ****55.00