FILED Mar 01, 2004 8:00 am Secretary of State

2004	LIMITE ANI	D LIA NUAL		INY

DOCUMENT # L99000000 1. Entity Name LEF/LAKE PARK, L.L.C.			7 9 7	03-01-200	04 90315	005 ****	55.00		
Principal Place of Business ONE GREENWAY PLAZA SUITE 850 HOUSTON, TX 77046 US	Mailing Address ONE GREENWAY PLAZA SUITE 850 HOUSTON, TX 77046	US				EN ab iy ba nk ba n		111: AN (F1)	
2. Principal Place of Business	3. Mailing Address								
Suite, Apt. #, etc.	Suite, Apt. #, etc.			01152004	Chg-LLC	CR2E08	33 (10/03)		
City & State	City & State			4. FEI Number 65-0893724			, 	Applied For Not Applicable	
Zip Country	Zip Country			5 Cartificate of Status Desired M \$5				5.00 Additional	
6. Name and Address of Curren	Registered Agent			7. Name and	Address of New I	Registered A	gent		
SHAPIRO, ROBERT L		Nan							
2627 IVES DAIRY ROAD SUITE 118		Stre	Street Address (P.O. Box Number is Not Acceptable)						
AVENTURA, FL 33180									
	City	City FL Zip Code							
SIGNATURE Signature, typed or printed name of registered eger Filling Fee is \$50.00 Due by May 1, 2004	t and title if applicable. (NOTE:	Registered Agent :	signature require	d when reinstating)		DATE ke check pa la Departme		e	
9. MANAGING MEMB	ERS/MANAGERS	10.			ADDITIONS	/CHANGES			
TITLE PDR NAME FRIEDMAN, LEONARD E STREET ADDRESS CITY-SI-ZIP HOUSTON, TX 770460196	☐ Delete	TITLE NAME STREET ADDR	ESS		Abbillione	y or intrade	Change	☐ Addition	
IIILE V NAME FRIEDMAN, DAVID A STREET ADDRESS CITY-ST-ZIP HOUSTON, TX 77046	Delete	TITLE NAME STREET ADDR	ESS		,		☐ Change	Addition	
TITLE VS NAME RAY, SANDRA E STREET ADDRESS CITY-ST-ZIP HOUSTON, TX 770460196	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	l l				Change	Addition	
TITLE V NAME SWINKE, DAVID L STREET ADDRESS ONE GREENWAY PLAZA, SUI HOUSTON, TX 770460196	SWINKE, DAVID L . NA ONE GREENWAY PLAZA, SUITE 850 ST						☐ Change	Addition	
ITILE VT NAME THIBAUT, HOWARD W STREET ADDRESS ONE GREENWAY PLAZA, SUI HOUSTON, TX 770460196	☐ Delete	TITLE NAME STREET ADDR					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME Street addi City-St-Zip		,			Change	Addition	
11. I hereby certify that the information supplied w indicated on this report is true and accurate ar limited liability company or the receiver or trus LEF/Lake Park, LLC, San	ith this filing does not qualify for and that my signature shall have to see empowered to execute this radra Ray, Vice Pre	the exemption the same legal eport as requestion to the same legal eport as requestion to the same than the same that the same than the same t	n stated in S I effect as if ired by Cha	Section 119.07(3) made under oath pter 608, Florida	(i), Florida Statutes ı; that I am a man Statutes.	s. I further cer aging membe	tify that the i er or manag	nformation er of the	
SIGNATURE:	Sanda Ka	AGER/ORAUTH	ORIZED REPRE		/23/04 Date	713-850	-1850 Daytime Phone #		