2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9900000799

1. Entity Name

LAKE LECLARE PROPERTY, L.L.C.



FILED Feb 14, 2003 8:00 am Secretary of State 02-14-2003 90065 032 ****50.00

CAINE ELOC			N. S.			
Principal Place	of Business	Mailing Address				
2303 S. HESPERIDES		2303 S. HESPERIDES TAMPA FL 33629			RB311 88514 18515 14	110 1011 100i
2. Principal Pla	ace of Business	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKIN	IG CHANGES	
City & State		City & State		4. FEI Number NOT APPLICABLE	⊑ 1 	oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$5.00 Add	itional
	6. Name and Address of Current R	naistered Agent	<u> </u>	7. Name and Address of New Registere		
	5. Name and Address of Current In	egiatorea Agent	Name			
601 (er, sam i e. Twiggs street, suite 200		Street Addre	(P.O. Box Number is Not Acceptable)		
TAM	PA FL 33602					
i			City	F	Zip Cod	e
8. The above the obligation	named entity submits this statement for toons of registered agent.	the purpose of changing its	registered office or regi	stered agent, or both, in the State of Florida. 1 ar	n familiar with,	and accept
SIGNATURE _	Signature, typed or printed name of registered agent an	d title if applicable. (NOT	E: Registered Agent signature reg	quired when reinstating) DATE		
·	Signature, typed of princes that is registered against	·	OW!!! FEE IS \$50.0	00		
			le to Florida Depart			}
			e By May 1, 2003			Ì
	MANAGING MEMBER	i	10.	ADDITIONS/CHANG	ES	
9.	MGRM	Delete	TITLE		Change	Addition
TITLE NAME	ARTZIBUSHEV, CONSTANTIN	□ Detete	NAME		_ `	
STREET ADDRESS	1525 W. HILLSBOROUGH AVENL	JĖ	STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33603	- <u>-</u>	CITY-ST-ZIP			
TITLE	MGRM	☐ Delete	TITLE		Change	☐ Addition
NAME :	PHILLIPS, THOMAS G	- J - 2,	NAME	and the second of the second o	سدر پنس	
STREET ADDRESS	2303 S. HESPERIDES		STREET ADORESS			
City-St-ZiP	TAMPA FL 33629	<u> </u>	CITY-ST-ZIP			
TITLE	MGRM	Delete	TITLE		☐ Change	☐ Addition
NAME	HYATT, HENRY	te.	NAME STREET ADDRESS			
STREET ADDRESS City-St-Zip	1525 W. HILLSBOROUGH AVENU	JE .	CITY-ST-ZIP			
·	TAMPA FL 33603	□ Delete	TITLE		☐ Change	☐ Addition
TITLE NAME	MGRM Hyatt, Susan I	L) Delete	NAME			_
STREET ADDRESS	1525 W. HILLSBOROUGH AVENU)F	STREET ADDRESS		•	ļ
CITY-ST-ZIP	TAMPA FL 33603	JL	CITY-ST-ZIP			}
TITLE	MGRM	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	LEON, HERMAN		NAME			
STREET ADDRESS	1525 W. HILLSBOROUGH AVENU	JE	STREET ADDRESS			ļ
CITY-ST-ZIP	TAMPA FL 33603	<u></u>	CITY-ST-ZIP			
TITLE	MGRM	☐ Delete	TITLE		☐ Change	Addition
NAME	LEON, ESPERANZA		NAME			
		· -	■ CIDELL YDDDEGG			
STREET ADDRESS CITY-ST-ZIP	1525 W. HILLSBOROUGH AVENI TAMPA FL 33603	JE	STREET ADDRESS CITY-ST-ZIP			l

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.