

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000002694

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Entity Name:** MIDWAY PROPERTIES OF ST. LUCIE COUNTY, L.C.

**Current Principal Place of Business:**

417 NORTH CAUSEWAY  
NEW SMYRNA, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

417 NORTH CAUSEWAY  
NEW SMYRNA, FL 32169

**New Mailing Address:**

**FEI Number:** 65-0979986

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEE, FRANK H III,ESQ  
426 AVENUE A  
FORT PIERCE, FL 34950 US

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

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LUNSFORD, EDWIN C JR,TRUS  
**Address:** 417 NORTH CAUSEWAY  
**City-St-Zip:** NEW SMYRNA, FL 32169

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: EDWIN C. LUNSFORD, JR., TRUSTEE

MGRM

02/07/2011

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