2000 UNI	# L9900)0002727		AND FILED
1. Entity Name AZALEA APARTMENTS OF LAKE COUNTY, L.L.C.				00 MAR 27 AM 9: 45
	INTO OF DARE O	OUNTT, L.L.C.		
incipal Place of Business	~	Mailing Address		SECRETARY OF STATE TALLAHASSEE, FLORIDA
O. BOX 730	2	P.O. BOX 730		Derte
ISLEY FL 32767		PAISLEY FL 32767-0730)	74916
Principal Place of Busin	iess .	3. Mailing Address		T TOPACON CIA CATA CATA CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR
Suite, Apt. #, etc.	<u></u>	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State		City & State		4. FEI Number
Zip	Country	Zip	Country	5 Certificate of Status Desired \$5.00 Additional
-	······································			Fee Required
6. Name	and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent
ROBINSON, DONALD L		Street Addres	ess (P.O. Box Number is Not Acceptable)	
42554 MAGGIE JONE PAISLEY FL 32767	es road			
			City	FL Zip Code
The all successful and its				istered agent, or both, in the State of Florida.
SNATURE Signature, typed of	or printed name of registered agent	FILE	DTE: Registered Agent signature req NOW !!! FEE IS \$50.0 Payable to Departmen	00
SNATURE Signature, typed	· · · · · · · · · · · · · · · · · · ·	FILE N Make Check P	NOW!!! FEE IS \$50.0 Payable to Departmen	00 ht of State
Signature, typed a	MANAGING MEMB	FILE N Make Check P	OW!!! FEE IS \$50.0	ADDITIONS/CHANGES
LE MGRM ME ROBINSO!	MANAGING MEMB	FILE N Make Check P ERS/MEMBERS	NOW!!! FEE IS \$50.0 Payable to Departmen	ADDITIONS/CHANGES
Signature, typed of ME ROBINSO! P. 0. BOX PAISLEY F	MANAGING MEMB N, DONALD L 730	FILE N Make Check P ERS/MEMBERS	NOW!!! FEE IS \$50.0 Payable to Departmen 10. TITLE NAME	ADDITIONS/CHANGES Image Addition GOOOO32075669 -04/13/0001085009 *****55.00 *****55.00
Signature, typed of ME ROBINSO! P.0. BOX PAISLEY F LE MGRM	MANAGING MEMB N, DONALD L 730 FL 32767	FILE N Make Check P ERS/MEMBERS	NOW!!! FEE IS \$50.0 Payable to Departmen 10. TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES Image Addition GOOOD32075663 -04/13/0001085009 *****55.00 *****55.00
Signature, typed of AE MGRM AE ROBINSON P-81-ZEP PAISLEY F E MGRM RE ROBINSON RET ADDRESS P.O. BOX	MANAGING MEMB N, DONALD L 730 FL 32767 N, HILDA R 730	FILE M Make Check P ERS/MEMBERS	NOW!!! FEE IS \$50.0 Payable to Departmen 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES Image Addition GOOOO32075669 -04/13/0001085009 *****55.00 *****55.00
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