

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M02000002877

**FILED**  
**Dec 11, 2005**  
**Secretary of State**

**Entity Name:** THE LAKES MOBILE HOME PARK, L.L.C.

**Current Principal Place of Business:**

10800 EAST LEISURE LANE  
LAKE WALES, FL 33898

**New Principal Place of Business:**

**Current Mailing Address:**

10800 EAST LEISURE LANE  
LAKE WALES, FL 33898

**New Mailing Address:**

**FEI Number:** 27-0031065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REAMER, JOHN G JR  
10800 EAST LEISURE LANE  
LAKE WALES, FL 33898 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: JOHN G REAMER JR

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: REAMER, JOHN G JR.  
Address: 3334 WESTBURY RD.  
City-St-Zip: BIRMINGHAM, AL 35223

Title: MGRM (X) Delete  
Name: ULERY, JACK B  
Address: 10800 EAST LEISURE LANE  
City-St-Zip: LAKE WALES, FL 33898

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: REAMER, JOHN G JR.  
Address: 3022 CLUB DRIVE  
City-St-Zip: DESTIN, FL 32550

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN G REAMER JR

MGRM

12/11/2005

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