## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M04000002742

Entity Name: PRO2 LAKE CITY, LLC

Address:

City-St-Zip:

5800 CREEK ROAD

CINCINNATI, OH 45242

FILED Apr 29, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 155 N.E. ENTERPRISE WAY LAKE CITY, FL 32055 **Current Mailing Address: New Mailing Address:** 5800 CREEK ROAD C/O PRO2 HOLDINGS, LLC LAKE CITY, FL 32055 FEI Number: 04-3667986 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221 E PALM BEACH GARDENS, FL 33410 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete ARCHDEACON, NANCY Name: Name: Address: 5800 CREEK ROAD Address: City-St-Zip: CINCINNATI, OH 45242 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: FORD, TIMOTHY Name: Address: 5800 CREEK ROAD Address: City-St-Zip: CINCINNATI, OH 45242 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MOORE, MICHAEL D Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: TIMOTHY FORD TF 04/29/2008