## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # M05000000213** 

1. Entity Name
FLA LAKESIDE, LLC



Jan 29, 2007 08:00 AM Secretary of State

**FILED** 

Principal Place of Business

Mailing Address

212 WEST VAN BUREN STREET, 9TH FLOOR CHICAGO, IL 60607

212 WEST VAN BUREN STREET, 9TH FLOOR CHICAGO, IL 60607



01222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-2163049

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

## DO NOT WRITE IN THIS SPACE

	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.	I am familiar with, and accept
	the obligations of registered agent	
e i	CNATURE	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

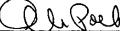
9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS	MGR LAKESIDE HOLDINGS-FLA, LLC 212 WEST VAN BUREN STREET, 9TH FLOOR
CITY-ST-ZIP	CHICAGO, IL 60607
NAME STREET ADDRESS CITY-ST-ZIP	MGRM POLLACK, ALAN 212 WEST VAN BUREN STREET 9TH FLOOR CHICAGO, IL 60607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000607141 01/31/07-80025-013 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes: I further certify that the information 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.

SIGNATURE:



1/23/07

312-377-7100