

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001094

Entity Name: LAKE WALES ASSOCIATES, LLC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

C/O BUCKINGHAM PROPERTIES
116 RADIO CIRCLE, SUITE 200
MOUNT KISCO, NY 10549

New Principal Place of Business:

Current Mailing Address:

C/O BUCKINGHAM PROPERTIES
116 RADIO CIRCLE, SUITE 200
MOUNT KISCO, NY 10549

New Mailing Address:

FEI Number: 20-2378038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINE, PAT
C/O SWAIN REALTY CORPORATION
1154 HAVENDALE BLVD.
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

RMC PROPERTY GROUP
JAMIE YOAKUM
1733 W. FLETCHER AVE
TAMPA, FL 33612 US

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: JAMIE YOAKUM

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FORTUNE COMMERCIAL M, ANAGEMENT, LLC
Address: 116 RADIO CIRCLE, SUITE 200
City-St-Zip: MOUNT KISCO, NY 10549

Title: MGR () Delete
Name: TRIMAR EQUITIES CO.,, L.P.
Address: 116 RADIO CIRCLE, SUITE 200
City-St-Zip: MOUNT KISCO, NY 10549

ADDITIONS/CHANGES:

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

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

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.

SIGNATURE: RICHARD COHEN

MGR

04/07/2009

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