

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004791

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** LYNN VILLAGE APARTMENTS PHASE 1, LLC

**Current Principal Place of Business:**

8703 FINLARIG DR.  
DUBLIN, OH 43017

**New Principal Place of Business:**

**Current Mailing Address:**

8703 FINLARIG DR.  
DUBLIN, OH 43017

**New Mailing Address:**

267 BRIARBEND BLVD  
POWELL, OH 43065

FEI Number: 20-0406121      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

BDB AGENT CO.  
5355 TOWN CENTER ROAD  
SUITE 900  
BOCA RATON, FL 33486 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: LENHART, MICHAEL JR.  
Address: 8703 FINLARIG DR.  
City-St-Zip: DUBLIN, OH 43017

Title: MGR      (X) Delete  
Name: BURGESS, ANDREW C  
Address: 1770 WRIGHT AVE  
City-St-Zip: ROCKY RIVER, OH 44116

**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: MICHAEL W LENHART

MGR

05/01/2008

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