

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000109158

Entity Name: L.L. RECREATIONS, INC.

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1116 OLD LAKE ALFRED ROAD  
LAKE ALFRED, FL 33850

**New Principal Place of Business:**

**Current Mailing Address:**

1116 OLD LAKE ALFRED ROAD  
LAKE ALFRED, FL 33850

**New Mailing Address:**

FEI Number: 59-3695235

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOWE, CARLTON W  
1116 OLD LAKE ALFRED ROAD  
LAKE ALFRED, FL 33850 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LOWE, CARLTON W  
Address: 1116 OLD LAKE ALFRED ROAD  
City-St-Zip: LAKE ALFRED, FL 33850

Title: D  
Name: LOWE, JENNIFER L  
Address: 1116 OLD LAKE ALFRED ROAD  
City-St-Zip: LAKE ALFRED, FL 33850

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER LOWE

D

03/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date