## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004589

Entity Name: LAKE NONA LAND COMPANY, LLC

**Current Principal Place of Business:** 

6900 TAVISTOCK LAKES BLVD.

SUITE 200

ORLANDO, FL 32827

**Current Mailing Address:** 

6900 TAVISTOCK LAKES BLVD.

SUITE 200

ORLANDO, FL 32827 US

FEI Number: 27-1740765 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL REGISTERED AGENTS, INC. 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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: PETER F. SOUZA, ASSISTANT SECRETARY 03/29/2018

**Electronic Signature of Registered Agent** 

Date

FILED Mar 29, 2018

**Secretary of State** 

CC9287151171

Authorized Person(s) Detail:

Title MGR Title VP

Name VOSS, JEFFERSON R. Name THAKKAR, RASESH

Address 6900 TAVISTOCK LAKES BLVD. Address 6900 TAVISTOCK LAKES BLVD.

SUITE 200 SUITE 200

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title MGR, P Title VP

Name ZBORIL, JAMES L. Name PEEK, SCOTT I. JR.

Address 6900 TAVISTOCK LAKES BLVD. Address 6900 TAVISTOCK LAKES BLVD.

SUITE 200 SUITE 200

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title VP Title VP, SECRETARY

Name ADAMS, ROBERT B. Name RENCORET, MICHELLE R.

Address 6900 TAVISTOCK LAKES BLVD. Address 6900 TAVISTOCK LAKES BLVD.

SUITE 200 SUITE 200

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title VP Title T

Name IRELAND, RALPH H. Name BEUCHER, NICHOLAS F III

Address 6900 TAVISTOCK LAKES BLVD. Address 6900 TAVISTOCK LAKES BLVD.

SUITE 200 SUITE 200

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES L. ZBORIL MANAGER 03/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date