

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000019173

**Entity Name:** LAKEPAR LLC

**Current Principal Place of Business:**

312 QUAY ASSISI  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

PO BOX 2556  
NEW SMYRNA BEACH, FL 32170 US

**FEI Number:** 42-1660863

**Certificate of Status Desired:** No

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

DULFER, MARINUS PAUL  
312 QUAY ASSISI  
NEW SMYRNA BEACH, FL 32169 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	DULFER, M. PAUL	Name	BOST, DAVID
Address	312 QUAY ASSISI	Address	616 CARIBBEAN DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32169	City-State-Zip:	LAKELAND FL 33803

*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:** M. PAUL DULFER

**MGR**

**01/19/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date