2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 491734

FILED Feb 13, 2009 Secretary of State

Entity Name: LAKE GARDENS CORPORATION							
Current Principal Place of Business:				New Principal Place of Business:			
81 LAKE GARDENS DRIVE STATE ROAD 621 EAST LAKE PLACID, FL 33852				81 LAKE GARDENS DRIVE LAKE PLACID, FL 33852			
Current Mailing Address:				New Mailing Address:			
81 LAKE GARDENS DRIVE STATE ROAD 621 EAST LAKE PLACID, FL 33852				81 LAKE GARDENS DRIVE LAKE PLACID, FL 33852			
FEI Number:	59-1639345	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
NIELANDER, WILLIAM 116 E. INTERLAKE BLVD. LAKE PLACID, FL 33852 US				RITTMAN, RAY 81 LAKE GARDENS DRIVE LAKE PLACID, FL 33852 US			
The above in the State		ubmits this statement for the	e purpose o	f changing i	ts registe	ered office or registered agent, or both,	
SIGNATURE: RAY RITTMAN				02/13/2009			
	Electroni	c Signature of Registered A	\gent			Date	
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () FONEAL, ISAAC 80 LAKE GARDI LAKE PLACID, F	ENS DR		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T () RITTMAN, RAY 21 LAKE GARDI LAKE PLACID, F			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S () GOINS, PATRIC 35 LAKE GARDE LAKE PLACID, F	ENS DR		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	VP ()	Delete		Title:	VP	(X) Change () Addition	

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 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

FOLGER, LARRY

42 LAKE GARDENS DRIVE

LAKE PLACID, FL 33852

SIGNATURE: RAY RITTMAN 02/13/2009 Τ

WEAVER, BUCKLEY

48 LAKE GARDENS DRIVE

LAKE PLACID, FL 33852

Name:

Address:

City-St-Zip: