


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 17, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # F01000002857	
1. Entity Name LINDERLAKE CORPORATION	

Principal Place of Business 9981 WEST 190TH STREET SUITE H MOKENA, IL 60448	Mailing Address 9981 WEST 190TH STREET SUITE H MOKENA, IL 60448
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**DO NOT WRITE IN THIS SPACE**

07072006 No Chg-P CR2E034 (11/05)

4. FEI Number 36-3593725	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REGISTERED AGENTS LEGAL SERVICES, INC.  
 1333 NORTH DUVAL STREET  
 TALLAHASSEE, FL 32302

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PDT
NAME	JUSKIE, KENNETH R
STREET ADDRESS	9981 WEST 190TH STREET SUITE H
CITY-ST-ZIP	MOKENA, IL 60448
TITLE	DV
NAME	PONCE, MARK F
STREET ADDRESS	9981 WEST 190TH STREET SUITE H
CITY-ST-ZIP	MOKENA, IL 60448
TITLE	SC
NAME	JUSKIE, VICTORIA A
STREET ADDRESS	9981 WEST 190TH STREET SUITE H
CITY-ST-ZIP	MOKENA, IL 60448
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 07/18/06-80003-007, 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth R. Juskie Kenneth R. Juskie 7/7/06 708.478.7012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #