

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # F13421

1. Entity Name
SILVER LAKE DAIRY OF JEFFERSON COUNTY, INC.



Principal Place of Business

Mailing Address

240 WEST WASHINGTON ST.
 MONTICELLO, FL 32344

240 WEST WASHINGTON ST.
 MONTICELLO, FL 32344



01122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2099538 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional
 Fee Required

6. Name and Address of Current Registered Agent

MILLER, GEORGE
 240 WEST WASHINGTON ST.
 MONTICELLO, FL 32344

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00

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

10. OFFICERS AND DIRECTORS

TITLE P
 NAME BAILEY, CLAUDIA
 STREET ADDRESS 43 PINEVIEW DR
 CITY-ST-ZIP WARRENVILLE, SC 29851

TITLE SD
 NAME MILLER, JUDY F.
 STREET ADDRESS 240 W WASHINGTON ST
 CITY-ST-ZIP MONTICELLO, FL 32344

TITLE TD
 NAME CHARRON, GLORIA A.
 STREET ADDRESS 506 LUTHER FOUNTAIN RD.
 CITY-ST-ZIP MONTICELLO, FL 32344

TITLE D
 NAME BAILEY, YVONNE S.
 STREET ADDRESS 8128 OAKWOOD ST
 CITY-ST-ZIP JACKSONVILLE, FL 32208

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

000000396345
 01/30/06-80006-016 150.00

**DO NOT WRITE
 IN THIS SPACE**

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:

Judy F. Miller
 JUDY F. MILLER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-06

Date

997-2686

Daytime Phone if