

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005993

FILED
Feb 20, 2006
Secretary of State

Entity Name: LAKE SEMINOLE SQUARE MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

111 WESTWOOD PLACE SUITE 200
BRENTWOOD, TN 37027

New Principal Place of Business:

Current Mailing Address:

111 WESTWOOD PLACE SUITE 200
BRENTWOOD, TN 37027

New Mailing Address:

FEI Number: 59-2922555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SHERIFF, W E
Address: 111 WESTWOOD PLACE, STE 200
City-St-Zip: BRENTWOOD, TN

Title: CFO () Delete
Name: RICHARDSON, BRYAN
Address: 111 WESTWOOD PLACE, STE 200
City-St-Zip: BRENTWOOD, TN 37027

Title: V () Delete
Name: KAESTNER, H T
Address: 111 WESTWOOD PLACE, STE 200
City-St-Zip: BRENTWOOD, TN

Title: VST () Delete
Name: HICKS, GEORGE T
Address: 111 WESTWOOD PLACE, STE 200
City-St-Zip: BRENTWOOD, TN

Title: V () Delete
Name: MONEY, JAMES T
Address: 111 WESTWOOD PLACE, STE 200
City-St-Zip: BRENTWOOD, TN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: GEORGE T. HICKS

VST

02/20/2006

Electronic Signature of Signing Officer or Director

_____ Date