2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000296

FILED Mar 04, 2008 Secretary of State

Entity Name: LAKE CITY EXPOSURE FOUNDATION, INC **Current Principal Place of Business: New Principal Place of Business:** 360 NE BASCOM NORRIS DRIVE LAKE CITY, FL 32055 **Current Mailing Address: New Mailing Address:** 360 NE BASCOM NORRIS DRIVE LAKE CITY, FL 32055 FEI Number: 20-8261629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FARMER, ADEE R 360 NE BÁSCOM NORRIS DRIVE LAKE CITY, FL 32055 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FARMER, ADEE R Name: Name: Address: 360 NE BASCOM NORRIS DR Address: City-St-Zip: LAKE CITY, FL 32055 City-St-Zip: Title: () Delete Title: () Change () Addition Name: JERNIGAN, TIMMY Name: Address: 2696 COUNTRY CLUB RD Address: City-St-Zip: LAKE CITY, FL 32055 City-St-Zip: Title: SEC () Delete Title: () Change () Addition BLACK, TARA Name: Name: 166 SW HANCOCK COURT Address: Address: City-St-Zip: LAKE CITY, FL 32024 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADEE R FARMER P 03/04/2008