

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 09, 2005 8:00 am
Secretary of State

01-19-2005 90005 023 ***150.00

DOCUMENT # P03000150379 1. Entity Name LAKE MERIAL, INC.					
Principal Place of Business 502 HARMON AVENUE PANAMA CITY, FL 32401 US			Mailing Address P.O. BOX 9875 PANAMA CITY, FL 32417 US		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 20-0492229				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILLIAMS, JACK G 502 HARMON AVENUE PANAMA CITY, FL 32401			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 re-registering)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RD- FLEMING, GEORGE R P.O. BOX 9875 PANAMA CITY, FL 32417	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Fleming, George R P.O. Box 9875 Panama City Bch, FL 32417	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WPSD WILLIAMS, JACK 502 HARMON AVENUE PANAMA CITY, FL 32401	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Williams, Jack 502 Harmon Ave Panama City, FL 32401	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P [Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President James W. Mauck P.O. Box 9875 Panama City Bch, FL 32417	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Fincklow, Charles E P.O. Box 9875 Panama City Bch, FL 32417	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an other like empowered.					
SIGNATURE: George R. Fleming 2/4/05 850.233-9121 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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