2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000003985

1. Entity Name
DEL LAGO VENTURES, INC.

Principal Place of Business	Mailing Address
300 TECHNOLOGY COURT SMYRNA, GA 30082	300 TECHNOLOGY COURT SMYRNA, GA 30082

04022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2475871
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PASD
NAME	LENKER, MAX
STREET ADDRESS	300 TECHNOLOGY COURT
CITY-ST-ZIP	SMYRNA, GA
TITLE	CEOA
NAME	BOLCH JR, CARL
STREET ADDRESS	300 TECHNOLOGY COURT
CITY-ST-ZIP	SMYRNA, GA
TITLE	SD
NAME	BOLCH, SUSAN B
STREET ADDRESS	300 TECHNOLOGY COURT
CITY-ST-ZIP	SMYRNA, GA
TITLE	TASC
NAME	DUMBACHER, ROBERT J
STREET ADDRESS	300 TECHNOLOGY COURT
CITY-ST-ZIP	SMYRNA, GA
TITLE	D
NAME	MORAN, ALLISON B
STREET ADDRESS	300 TECHNOLOGY COURT
CITY-ST-ZIP	SMYRNA, GA
TITLE	VPAS
NAME	CZAJA, CLAUDE P
STREET ADDRESS	300 TECHNOLOGY CT
CITY-ST-ZIP	SMYRNA, GA 30082

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04/28/04-80035-021 150.00

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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 all other like empowered.

SIGNATURE: R J Dumbacher 4-26-04 (770) 431-7600, x.1188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ROBERT J. DUMBACHER