2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005653

FILED Mar 07, 2005 Secretary of State

Entity Name: FLORIDA LAKE MANAGEMENT SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business: 775 BRANTLY ROAD OSTEEN, FL 32764 US **Current Mailing Address: New Mailing Address:** PO BOX 950701 LAKE MARY, FL 327460701 FEI Number: 52-1754014 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: MCCRYSTAL, JULIE 775 BRANTLÝ ROAD US OSTEEN, FL 32764 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 (X) Change () Addition PATEL, SHAILESH HANLON, CHUCK Name: Name: 5889 AIRPORT ROAD STE 1407 Address: 3301 GUN CLUB RD Address: City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: WEST PALM BEACH, FL 33406 Title: Title: () Delete (X) Change () Addition HANLON, CHUCK Name: GRIFFIN, JIM Name: Address: 3301 GUN CLUB RD Address: 2379 BROAD STREET City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: BROOKSVILLE, FL 34609 Title: () Delete Title: () Change () Addition STEVENS-DIAZ, MONICA Name: Name: Address: PO BOX 10.170 Address: City-St-Zip: LAKE BUENA VISTA, FL 32830 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PERRY, MICHAEL Name: 107 N. LAKE AVE Address: Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip: Title: () Delete Title: () Change () Addition BURNS, JOHN Name: Name: 701 SAN MARCO BLVD., SUITE 1201 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: () Delete Title: () Change () Addition FORD CLELL Name: Name: Address: 4505 GEORGE BLVD. Address: SEBRING, FL 33875 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL J. PERRY T 03/07/2005