## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 177341** 

Title:

Name:

Address:

City-St-Zip:

Entity Name: LAKELAND TRANSITION HOLDINGS, INC

FILED Mar 21, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
320 W.MAII LAKELAND		US			
Current Mailing Address:			New Mailing Address:		
320 W.MAII LAKELAND		US	C/O BLACKS 4800 MONTO BETHESDA,	GOMERY LAN	ITAL NE, SUITE 940 US
FEI Number:	59-0708114	FEI Number Applied For ( ) FEI Nu	mber Not Applica	able ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:		
1540 GLEN	ATING SERV WAY DR. SEE, FL 3230	,			
The above in the State		submits this statement for the purpose	of changing its	registered of	fice or registered agent, or both,
SIGNATUR	E:				
	Electron	ic Signature of Registered Agent			Date
Election Cam	paign Financing				
OFFICERS AND DIRECTORS:					
OFFICERS		Trust Fund Contribution().  TORS:	ADDITIONS	CHANGES	TO OFFICERS AND DIRECTORS:
OFFICERS  Title: Name: Address: City-St-Zip:	AND DIREC	TORS:  Delete  MISTEAD JR	Title: [ Name: 0 Address: 4	DIR (X) GUNTY, MURRY	Change ( ) Addition MERY LANE, SUITE 940
Title: Name: Address:	AND DIRECTOR ( ) BURWELL, ARM 320 W. MAIN ST LAKELAND, FL	Delete MISTEAD JR T 33815 Delete DHN M	Title: [ Name: 0 Address: 4	DIR (X) GUNTY, MURRY 4800 MONTGON BETHESDA, MD	Change ( ) Addition MERY LANE, SUITE 940
Title: Name: Address: City-St-Zip: Title: Name: Address:	AND DIREC CEO () BURWELL, ARN 320 W. MAIN S' LAKELAND, FL CFO (X) CORCORAN, JG 320 W MAIN ST LAKELAND, FL	Delete MISTEAD JR T 33815  Delete DHN M . 33815  Delete CH.W. STE. 800	Title: E Name: C Address: 4 City-St-Zip: E Title: Name: Address:	DIR (X) GUNTY, MURRY 4800 MONTGON BETHESDA, MD	Change ( ) Addition MERY LANE, SUITE 940 20814

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MURRY N. GUNTY DIR 03/21/2007

(X) Delete

1775 EYE ST N.W. STE 800

WASHINGTON, DC 20006

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() Change () Addition