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2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 269505		
1. Entity Name THE LATT MAXCY CORPORATION		

FILED

08 MAY -2 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 33 E. WALL ST. FROSTPROOF, FL 33843	Mailing Address 33 E. WALL ST. FROSTPROOF, FL 33843
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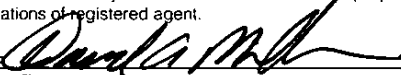
2. Principal Place of Business - No P.O. Box # 21299 US Hwy 27 Lake Wales, FL 33859-6851	3. Mailing Address P. O. BOX 3737 Lake Wales, FL 33859-3737
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04232008 Chg-P CR2E034 (12/06)

4. FEI Number 59-1004757	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WILSON, PEYTON T 33 E. WALL STREET FROSTPROOF, FL 33843	7. Name and Address of New Registered Agent David A. Miller 21299 US Hwy 27 Lake Wales, FL 33859-6851
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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 4/23/2008

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILSON, P T 122 MOUNTAIN LAKE ESTATES LAKE WALES, FL 33853 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILSON, PATRICIA 2200 N. SCENIC HWY BABSON PARK, FL 33827 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD WILSON, CLAYTON G 65 MOUNTAIN LAKE ESTATES LAKE WALES, FL 33853 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HENRY, CYNTHIA W MOUNTAIN LAKE ESTATES LAKE WALES, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CRADDOCK, F. HOOD 223 LAKE LINK ROAD WINTER HAVEN, FL 33884 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILSON, LATIMER T 200 AIRPORT ROAD FROSTPROOF, FL 33843 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	4-28-08 963.679-6700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

ATTACHMENT

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2008 FOR PROFIT CORPORATION ANNUAL REPORT OFFICERS AND DIRECTORS CONTINUED

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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
Title Name Street Address City - St - Zip	D Wilson, Patricia M. 122 Mountain Lake Lake Wales, FL 33859 <input type="checkbox"/> Delete	Title Name Street Address City - St - Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City - St - Zip	VD Blaylock, Claire W 107 Augusta Trail Cullman, AL 35057 <input type="checkbox"/> Delete	Title Name Street Address City - St - Zip	V Blaylock, Claire W 1020 CR 1482 Cullman, AL 35058 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City - St - Zip	<input type="checkbox"/> Delete	Title Name Street Address City - St - Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City - St - Zip	<input type="checkbox"/> Delete	Title Name Street Address City - St - Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition