


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT #376834 1. Entity Name LAKE COUNTY SERVICE CORPORATION	
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Principal Place of Business 800 NORTH BOULEVARD, WEST LEESBURG, FL 34748	Mailing Address P.O. BOX 490420 LEESBURG, FL 34749-0420 US
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DO NOT WRITE IN THIS SPACE



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1346636	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KURTZ, STEPHEN T. 34035 PARK LANE LEESBURG, FL 34788

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IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JUNOD, JOSEPH J. 9906 CR 114-A WILDWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RUTSCHOW, SANDRA L. #3 SPRING CT., THE SPRGS YALAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KURTZ, STEPHEN T. 34035 PARK LANE LEESBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HART, DWIGHT L. 27 COVE LANE EUSTIS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERLONG, JAMES H 6526 N SILVER LAKE DR LEESBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MUELLER, PAUL K 604 BANNING BEACH ROAD TAVARES, FL

U00000174184
01/07/05-80047-022 150.00

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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)(f), 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:  Stephen T. Kurtz	01/05/05	(352) 787-3311
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>