

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 376834	
1. Entity Name LAKE COUNTY SERVICE CORPORATION	



FILED

06 MAY 19 PM 3:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 59-1346636	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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1st MOORE CR2E034 (10/05)

6. Name and Address of Current Registered Agent  KURTZ, STEPHEN T. 34035 PARK LANE LEESBURG FL 34788	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reconstituting) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	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 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RUTSCHOW, SANDRA L. #3 SPRING CT., THE SPRGS YALAH FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KURTZ, STEPHEN T. 34035 PARK LANE LEESBURG FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HART, DWIGHT L. 27 COVE LANE EUSTIS FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERLONG, JAMES H 6526 N SILVER LAKE DR LEESBURG FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MUELLER, PAUL K 604 BANNING BEACH ROAD TAVARES FL <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SARAH MOORE - D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ONE COMMERCE ST, MONTGOMERY, AL 36104
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100074416771 05/11/06--01007--002 **950.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVID REIMER - SUP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ONE COMMERCE ST, MONTGOMERY, AL 36104
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B 5/26/06

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____	9/12/06	Stephen T. Kurtz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date