


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Mar 27, 2007 08:00 AM  
Secretary of State**

<b>DOCUMENT # 393306</b> 1. Entity Name <b>RED LAKE CORPORATION</b>	
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Principal Place of Business <b>199 RED LAKE RD. SOPCHOPPY, FL 32358 US</b>	Mailing Address <b>199 REDLAKE RD SOPCHOPPY, FL 32358 US</b>
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**DO NOT WRITE IN THIS SPACE**



03262007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-1512659**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**DAVIS TERRY N.  
199 RED LAKE RD.  
SOPCHOPPY, FL 32358**

**DO NOT WRITE  
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>04/04/07-80017-015 150.00</b>
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10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DAVIS, HOWARD
STREET ADDRESS	2880 JEWEL DRIVE
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	V
NAME	DAVIS, BROWARD P
STREET ADDRESS	2414 MAHAN DR
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	T
NAME	DAVIS TERRY
STREET ADDRESS	199 RED LAKE RD
CITY-ST-ZIP	SOPCHOPPY, FL 32358
TITLE	V
NAME	DAVIS, LARRY E
STREET ADDRESS	38 E DAVIS RD
CITY-ST-ZIP	SOPCHOPPY, FL 32358
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: TERRY N. DAVIS 3-26-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

962-4983