


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 435968 1. Entity Name JUNIPER LAKE CORPORATION	
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Principal Place of Business 410 E. GOVERNMENT ST. PENSACOLA, FL 32502	Mailing Address P.O. BOX 1671 PENSACOLA, FL 32591
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02042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1485643	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 SHERRILL, RICHARD 410 E. GOVERNMENT ST. PENSACOLA, FL 32501

**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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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	PD SHERRILL, RICHARD H 410 E. GOVERNMENT STREET PENSACOLA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHERRILL, F. W., JR ROUTE 1, BOX 305 GULF BREEZE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
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:  **RICHARD H. SHERRILL** 2/16/06 850-432-9827
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #