

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 581602 (0)

1. Corporation Name  
LIMA LAKE, INC.



Principal Place of Business Mailing Address  
501 MANDALAY AVE. 501 MANDALAY AVE.  
P O BOX 3488 P O BOX 3488  
CLEARWATER BEACH FL 34630-5488 CLEARWATER BEACH FL 34630-5488

3. Date Incorporated or Qualified 08/08/1978 3a. Date of Last Report 04/21/1995  
4. FEI Number 59-1334347 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

RAUSCH, MICHAEL C  
501 MANDALAY AVE-OFFICE  
CLEARWATER BEACH FL 33515

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature retained when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	SCHREIBER, KATHERINE	501 MANDALAY AVE.	CLEARWATER BCH. FL.	<input type="checkbox"/>
D	SHAW-KENNEDY, B.J.	501 MANDALAY AVE.	CLEARWATER BEACH FL	<input type="checkbox"/>
D	DUBROW, ELI	501 MANDALAY AVE.	CLEARWATER BEACH FL	<input type="checkbox"/>
D	LOUIS, LARRY	501 MANDALAY AVE.	CLEARWATER BEACH FL	<input type="checkbox"/>
PT	RAUSCH, MICHAEL C	501 MANDALAY AVE.	CLEARWATER BEACH FL	<input type="checkbox"/>
S	BAKER, BARBARA	A501 MANDALAY AVENUE	CLEARWATER BEACH FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
D	Bourdin, Noel	501 Mandalay Avenue	Clearwater Beach, Florida	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Assistant Treasurer	Schreiber, Peter	501 Mandalay Avenue	Clearwater Beach, Florida	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Michael C. Rausch* M.C. RAUSCH 4-30-96 813/443-2400  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)