


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2008 8:00 am
Secretary of State

06-23-2008 90001 009 ***150.00

DOCUMENT # 601290 1. Entity Name R & F PROPERTIES OF LAKE COUNTY, INC.					
Principal Place of Business 802 EAST DIXIE AVENUE LEESBURG, FL 34748-6014			Mailing Address 802 EAST DIXIE AVENUE LEESBURG, FL 34748-6014		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address <i>New - R & F Properties Attn: Larry Foster</i>		
Suite, Apt. #, etc.			Suite, Apt. #, etc. <i>849 Hawk Landing</i>		
City & State			City & State <i>Fruitland FL</i>		
Zip		Country		Zip <i>34731</i>	
Country <i>USA</i>		4. FEI Number 59-1266833			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBINSON, JEFFREY 802 E. DIXIE AVENUE LEESBURG, FL 34748				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 reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBINSON, JEFFREY 802 E. DIXIE AVE. LEESBURG, FL 32748	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST FOSTER, LARRY 802 EAST DIXIE AVE. LEESBURG, FL 34748	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>Larry D. Foster</i> <i>VP/sec</i> <i>6/20/08</i> <i>352</i> <i>728-6860</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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