

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 820993

(4)

1. Corporation Name

LAKE YALE CORPORATION

Principal Place of Business

1412 AZALEA DR.
LEESBURG FL 34788

Main Address

1412 AZALEA DR.
LEESBURG FL 34788



2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

MILLER, WILLIAM C.
119 LAKE SHORE CIR
LEESBURG FL 34788

3. Date Incorporated or Qualified
12/18/1967

3a. Date of Last Report
03/07/1995

4. FEI Number
35-1155602

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

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 Section 607.06(1) and 607.15(6)(f), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the principal place of business at 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 understand the obligations of, Section 607.06(1), Florida Statutes.

SIGNATURE: *Norma K. Davis*

Date: *2/29/96*

12. OFFICERS AND DIRECTORS

1. NAME ☐ DELETED

DAVIS, NORMA K
1403 ALFRED STREET, #103B
TAVARES F

2. NAME ☐ DELETED

MILLER, WM. C.
119 LAKE SHORE CIR
LEESBURG FL

3. NAME ☐ DELETED

PD
NEW, LEROY K
1910 E 106 ST
CARMEL, IN 00000

4. NAME ☐ DELETED

5. NAME ☐ DELETED

6. NAME ☐ DELETED

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21. NAME ☐ DELETED

22. NAME ☐ DELETED

13.

1. NAME

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. NAME

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. NAME

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. NAME

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

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23. STREET ADDRESS

24. CITY, ST, ZIP

25. NAME

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. NAME

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96

352-483-1327

Display Phone #

CR2E034 (12/95)