

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002037

Entity Name: LAKE WEED-A-WAY, INC.

FILED
Feb 11, 2008
Secretary of State

Current Principal Place of Business:

800 N. MILFORD ROAD
SUITE 700
MILFORD, MI 48381

New Principal Place of Business:

Current Mailing Address:

800 N. MILFORD ROAD
SUITE 700
MILFORD, MI 48381

New Mailing Address:

FEI Number: 38-2244705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BOULEVARD
SUITE 100
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHEEK, GREGORY R
Address: 800 N. MILFORD ROAD #700
City-St-Zip: MILFORD, MI 48381

Title: P () Delete
Name: CHEEK, CHRISTOPHER
Address: 800 N. MILFORD ROAD #700
City-St-Zip: MILFORD, MI 48381

Title: S () Delete
Name: CHEEK, JESSICA
Address: 800 N. MILFORD ROAD #700
City-St-Zip: MILFORD, MI 48381

Title: T () Delete
Name: BOYD, HENRY A
Address: 800 N. MILFORD ROAD #700
City-St-Zip: MILFORD, MI 48381

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRY A. BOYD

T

02/11/2008

Electronic Signature of Signing Officer or Director

Date