

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005226

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: LAKE BUTLER CORPORATION

## Current Principal Place of Business:

581705 WHITE OAK ROAD  
YULEE, FL 32097

## New Principal Place of Business:

## Current Mailing Address:

581705 WHITE OAK ROAD  
YULEE, FL 32097

## New Mailing Address:

FEI Number: 13-4040459

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUNCAN, MARK  
9022 SOUTHEAST 186TH PLACE  
LAKE BUTLER, FL 32054 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: CD ( ) Delete  
Name: BERGREEN, BERNARD D  
Address: 1060 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10128

Title: VD ( ) Delete  
Name: MOODY, NATALIE P  
Address: 125 EAST 12TH STREET, APT 5D  
City-St-Zip: NEW YORK, NY 10003

Title: P ( ) Delete  
Name: GARRETT, VICTOR  
Address: 581705 WHITE OAK ROAD  
City-St-Zip: YULEE, FL 32097

Title: V ( ) Delete  
Name: SORRENTINO, DOMINICK  
Address: 581705 WHITE OAK ROAD  
City-St-Zip: YULEE, FL 32097

Title: ST ( ) Delete  
Name: CROPPER, STEPHEN W  
Address: 60 RIVERSIDE DRIVE  
City-St-Zip: NEW YORK, NY 10024

Title: AS ( ) Delete  
Name: LEVINE, HAROLD  
Address: 464 HARMONY WAY  
City-St-Zip: MONROE TOWNSHIP, NJ 08831

## 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:

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: DOMINICK SORRENTINO

VP

04/28/2009

Electronic Signature of Signing Officer or Director

Date