2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2009
Secretary of State

DOCUMENT# F13852

Entity Name: LAKE-SUMTER TRANSMISSIONS, INC.

Current Principal Place of Business:

700 S 14TH ST
LEESBURG, FL 34748 US

New Principal Place of Business:

Current Mailing Address:

380 W. ALFRED ST.
TAVARES, FL 32778

New Mailing Address:

700 S 14TH ST
LEESBURG, FL 34748 US

FEI Number: 59-2051973 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, CHRISTOPHER J
380 WEST ALFRED STREET
TAVARES, FL 32778 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: PD ( ) Delete
Name: HALL, MICHAEL,
Address: 6423 SUNNYSIDE DRIVE
City-St-Zip: LEESBURG, FL

Title: DV ( ) Delete
Name: BERRY, ROGER,
Address: 29205 S CORLEY ISLAND
City-St-Zip: LEESBURG, FL 34748

Title: SD ( ) Delete
Name: HALL, DONNA,
Address: 6423 SUNNYSIDE DRIVE
City-St-Zip: LEESBURG, FL

Title: TD ( ) Delete
Name: BERRY, DEBRA,
Address: 29205 S CORLEY ISLAND
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HALL, MICHAEL,
Address: 6423 SUNNYSIDE DRIVE
City-St-Zip: LEESBURG, FL 34748 US

Title: DV (X) Change ( ) Addition
Name: BERRY, ROGER,
Address: 29205 S CORLEY ISLAND
City-St-Zip: LEESBURG, FL 34748 US

Title: SD (X) Change ( ) Addition
Name: HALL, DONNA,
Address: 6423 SUNNYSIDE DRIVE
City-St-Zip: LEESBURG, FL 34748 US

Title: TD (X) Change ( ) Addition
Name: BERRY, DEBRA,
Address: 29205 S CORLEY ISLAND
City-St-Zip: LEESBURG, FL 34748 US

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: DONNA HALL S/D 04/03/2009

Electronic Signature of Signing Officer or Director Date