2006 FOR PROFIT CORPORATION

FILED Apr 14, 2006 08:00 AN Secretary of State

ANNUA	LKEPUKI	
DOCUMENT # G75275 1. Entity Name BIG LAKE ENTERPRISES, INC.		
Principal Place of Business	Mailing Address	
POST OFFICE BOX 675	POST OFFICE BOX 675	ļ
PAHOKEE EL 33476	PAHOKEE, FL 33476	1



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CR2E034 (11/05) No Chg-P 03292006 Applied For 4. FEI Number 59-2359157 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

TILLIS, W. F. 37031 FIRST ST CANAL POINT, FL 33438

DO NOT WRITE IN THIS SPACE

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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_			~ <u>.</u>	<u> </u>		- 1 PM	_,, _	
510(1)(1)(1)	Signature, typed or printed name of registered agent and title	If applicable. (NOTE Regi	stered Agent signature	required when reinstating)	, , , , , , , , , , , , , , , , , , ,	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign F Trust Fund Contributi			\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS .					•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TILLIS, W. F. 37031 FIRST ST CANAL POINT, FL 33438				. V0000	0508945		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CONLEY, ADA B 16500 SW MORGAN RD INDIANTOWN, FL 34956	<u> </u>			04/28/0E	-80019-023	150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TILLIS, BETTY J. 37031 FIRST ST CANAL POINT, FL 33438	<u></u>	4	DO	NOT WR	RITE		
TITLE NAME STREET ADDRESS CITY+ST-ZIP		open or an analysis of the second		IN 7	THIS SPA	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP			hrough					
12. Thereby indicated of the collaboration	certify that the information supplied with this is on this report or supplemental report is true poration or the receiver or trustee empowers, or on an attackment with an address, with a	illing does not qualify for the and accurate and that my si d to execute this report as n Il other like empowered.	exemptions co ignature shall ha equired by Chap	ntained in Chapter 119 ve the same legal effective oter 607, Florida Statute), Florida Statutes. I funct as if made under out as; and that my name a	ther certify that the info, that I am an officer oppears in Block 10 or I	ormation or director Block 11 if	