

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G76431

FILED
Mar 27, 2006
Secretary of State

Entity Name: LAKENDON, INCORPORATED

Current Principal Place of Business:

670 KISSIMMEE AVE
OCOE, FL 34761 US

New Principal Place of Business:

301 N. TUBB STREET
OAKLAND, FL 34760 US

Current Mailing Address:

P O BOX 220
KILLARNEY, FL 34740 US

New Mailing Address:

FEI Number: 59-2351770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINGATE, DONALD A.
110 MERICAM CT
P O BOX 6
KILLARNEY, FL 34740 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: P () Delete
Name: WINGATE, KENNETH R.,
Address: 11149 ROBERTSON RD.
City-St-Zip: WINTER GARDEN, FL

Title: ST () Delete
Name: WINGATE, CAROLE P,
Address: 110 MERICAM CT
City-St-Zip: KILLARNEY, FL

Title: VP () Delete
Name: WINGATE, DONALD A.,
Address: 110 MERICAM CT.
City-St-Zip: KILLARNEY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: WINGATE, CAROLE P,
Address: 110 MERICAM CT
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP (X) Change () Addition
Name: WINGATE, DONALD A.,
Address: 110 MERICAM CT.
City-St-Zip: WINTER GARDEN, FL 34787

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD A. WINGATE

VP

03/27/2006

Electronic Signature of Signing Officer or Director

_____ Date