
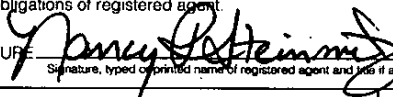



**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 28, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90174 049 \*\*\*158.75

DOCUMENT # L11467			
1. Entity Name LAKE SYLVIA II, INC.			
Principal Place of Business C/O LEO P. STEINMETZ 108 S OLD DIXIE HWY LADY LAKE, FL 32159-3834		Mailing Address C/O LEO P. STEINMETZ 108 S OLD DIXIE HWY LADY LAKE, FL 32159-3834	
2. Principal Place of Business 108 S. Old Dixie Hwy Suite, Apt. #, etc.		3. Mailing Address 108 S. Old Dixie Hwy Suite, Apt. #, etc.	
City & State Lady Lake, FL		City & State Lady Lake, FL	
Zip 32159		Zip 32159	
Country USA		Country USA	
4. FEI Number 59-2969598		Applied For Not Applicable	
5. Certificate of Status Desired		X \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STEINMETZ, LEO P. 3718 LAKE GRIFFIN RD LADY LAKE, FL 32159		7. Name and Address of New Registered Agent Name Nancy P. Steinmetz Street Address (P.O. Box Number is Not Acceptable) 3718 Lake Griffin Road City Lady Lake FL Zip Code 32159	
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  Nancy P. Steinmetz Pres.		DATE 4-23-05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME STEINMETZ, LEO P. STREET ADDRESS 3718 LAKE GRIFFIN RD CITY-ST-ZIP LADY LAKE, FL	<input checked="" type="checkbox"/> Delete	TITLE P/D NAME Nancy P. Steinmetz STREET ADDRESS 3718 Lake Griffin Road CITY-ST-ZIP Lady Lake, FL 32159	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE S NAME STEINMETZ, NANCY P. STREET ADDRESS 3718 LAKE GRIFFIN RD CITY-ST-ZIP LADY LAKE, FL	<input checked="" type="checkbox"/> Delete	TITLE V NAME Neil J. Steinmetz STREET ADDRESS 108 S. Old Dixie Hwy CITY-ST-ZIP Lady Lake, FL 32159	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE V NAME Stephen A. Steinmetz STREET ADDRESS 108 S. Old Dixie Hwy CITY-ST-ZIP Lady Lake, FL 32159	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE S/T NAME Susan O'Brien STREET ADDRESS 108 S. Old Dixie Hwy CITY-ST-ZIP Lady Lake, FL 32159	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE  Nancy P. Steinmetz Pres		DATE 4-23-05 DAYTIME PHONE # 352-753-9009	