

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 08, 2005 08:00 AM
Secretary of State

DOCUMENT # L98000000376

1. Entity Name
JOHN'S LAKE COMPANY, L.C.



Principal Place of Business
**5640 BROOKLINE DRIVE
ORLANDO, FL 32819**

Mailing Address
**5640 BROOKLINE DRIVE
ORLANDO, FL 32819**



07052005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3505047

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

5. Name and Address of Current Registered Agent

**BAXTER, CHARLES M III
5640 BROOKLINE DRIVE.
ORLANDO, FL 32819**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
BAXTER DEVELOPMENT CORP.
5640 BROOKLINE DRIVE
ORLANDO, FL 32819**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
STANDLEE, JOAN
28415 LAKE INDUSTRIAL BLVD.
TAVARES, FL 32778**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

- 1100000371658
07/08/05-80015-017 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Charles M. Baxter III Managing Partner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

7/5/05 407 876 4232
Date Daytime Phone #