

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00CORPORATION
ANNUAL REPORT
1995FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**FILED**
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 14 AM 9:09

DOCUMENT # M79580**(0)**

1. Corporation Name

LOST LAKE DEVELOPMENT CO.

Principal Place of Business

**101 N PLUMOSA ST
P.O. BOX 540548
MERRITT ISLAND FL 32954-0548**

Mailing Address

**101 N PLUMOSA ST
P.O. BOX 540548
MERRITT ISLAND FL 32954-0548**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/05/1988

3a. Date of Last Report

04/28/1994

4. FEI Number

59-2890295

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐ **\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes☒ Yes ☐ No

2. Principal Place of Business

21 101 NORTH PLUMOSA STREET

2a. Mailing Address

26 POST OFFICE BOX 540548

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MERRITT ISLAND, FLORIDA

City & State

28 MERRITT ISLAND, FLORIDA

Zip

Country

Zip

Country

24 32953**25 U.S.****29 32954-0548****30 U.S.**

9. Name and Address of Current Registered Agent

**ADAMS DOROTHY E
101 N PLUMOSA ST
MERRITT ISLAND FL 32953**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and this if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROWE, MORRIS, A
STREET ADDRESS	690 RANGE RD
CITY - ST - ZIP	COCOA FL
TITLE	V
NAME	PARKER, MARY P
STREET ADDRESS	101 N. PLUMOSA ST
CITY - ST - ZIP	MERRITT ISLAND FL 32953
TITLE	V
NAME	CROCKETT, BEVERLY, H
STREET ADDRESS	101 N PLUMOSA ST
CITY - ST - ZIP	MERRITT ISLAND FL
TITLE	VT
NAME	HAID, SUSAN, E
STREET ADDRESS	101 N PLUMOSA ST
CITY - ST - ZIP	MERRITT ISLAND FL
TITLE	VS
NAME	ADAMS, DOROTHY, E
STREET ADDRESS	101 N PLUMOSA ST
CITY - ST - ZIP	MERRITT ISLAND FL
TITLE	EVP
NAME	LUTHER, ROBERT A.
STREET ADDRESS	101 N PLUMOSA ST
CITY - ST - ZIP	MERRITT ISLAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	220 KING STREET
1.4 CITY - ST - ZIP	COCOA, FLORIDA 32922
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	MERRITT ISLAND, FL 32953
3.4 CITY - ST - ZIP	
4.1 TITLE	☒ Change ☒ Addition
4.2 NAME	P/D BOWDEN, DONALD L.
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	MERRITT ISLAND, FL 32953
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	V/S/T
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	MERRITT ISLAND, FL 32953
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	C MAXWELL, KING C.
6.3 STREET ADDRESS	1384 WALTON HEATH COURT
6.4 CITY - ST - ZIP	ROCKLEDGE, FLORIDA 32955

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an addendum.

SIGNATURE:

Dorothy E. Adams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DOROTHY E. ADAMS, VICE PRESIDENT

(407) 452-5480

M79580

**LOST LAKE DEVELOPMENT CO.
1995 CORPORATION ANNUAL REPORT
ATTACHMENT - ADDITIONS/CHANGES
at #12**

ADDITIONAL OFFICERS

VICE PRESIDENT

**EASTLING, SUE S.
101 N. PLUMOSA ST.
MERRITT ISLAND, FL 32953**

**NOWLIN, CYNTHIA A.
101 N. PLUMOSA ST.
MERRITT ISLAND, FL 32953**

**STEPHENS, HELEN L.
101 N. PLUMOSA ST.
MERRITT ISLAND, FL 32953**

**WALL, PATRICIA A.
101 N. PLUMOSA ST.
MERRITT ISLAND, FL 32953**

ADDITIONAL DIRECTORS

**GIOIA, G. LEONARD
255 Fortenberry Road
MERRITT ISLAND, FL 32952**

**KAY, SEBRON E.
307 Magnolia Avenue
MERRITT ISLAND, FL 32952**