

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002607

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: LAKE TECHNICAL CENTER, INC.

**Current Principal Place of Business:**

2001 KURT ST.  
EUSTIS, FL 32726

**New Principal Place of Business:**

**Current Mailing Address:**

2001 KURT ST.  
EUSTIS, FL 32726

**New Mailing Address:**

FEI Number: 20-0940772      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILLER, TERRY E  
2001 KURT ST.  
EUSTIS, FL 32726      US

**Name and Address of New Registered Agent:**

STONE & GERKEN, P.A.  
4850 N. HIGHWAY 19A  
MOUNT DORA, FL 32757      US

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: LEWIS STONE, ATTORNEY      04/09/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: BAUM, PHYLLIS  
Address: P.O. BOX 101  
City-St-Zip: WEIRSDALE, FL 32195

Title: D      ( ) Delete  
Name: JUDGE, JAMES  
Address: 2761 WEST OLD HWY. 441  
City-St-Zip: MOUNT DORA, FL 32757

Title: D      ( ) Delete  
Name: DEAS, ISAAC II  
Address: 207 BRYAN ST.  
City-St-Zip: EUSTIS, FL 32726

Title: D      ( ) Delete  
Name: CUNNINGHAM, ROBERT JR.  
Address: 1103 OVERLOOK DR.  
City-St-Zip: MOUNT DORA, FL 32757

Title: D      ( ) Delete  
Name: GAULDIN, MICKEY  
Address: 13220 SUGERBLUFF RD.  
City-St-Zip: CLERMONT, FL 34711

Title: S      (X) Delete  
Name: MILLER, TERRY E  
Address: 18903 HIGHWAY 19 N  
City-St-Zip: GROVELAND, FL 34736

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHYLLIS BAUM      D      04/09/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date