

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007242

FILED
Jun 21, 2007
Secretary of State

Entity Name: BLUE LAKE ACADEMY, INC.

Current Principal Place of Business:

3551 EAST ORANGE AVENUE
EUSTIS, FL 32736

New Principal Place of Business:

Current Mailing Address:

PO BOX 1947
EUSTIS, FL 32727

New Mailing Address:

FEI Number: 59-3547632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HAYMAND, SKIP D
19529 SPRINGOAK DR
EUSTIS, FL 32736 US

Name and Address of New Registered Agent:

HAYMANS, SKIP D
19529 SPRINGOAK DR
EUSTIS, FL 32736 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: SKIP HAYMANS

06/21/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAYMANS, SKIP DR
Address: 19529 SPRINGOAK DR
City-St-Zip: EUSTIS, FL 32736

Title: T () Delete
Name: CADDELL, DANNY MR.
Address: PO BOX 677
City-St-Zip: TAVARES, FL 32778

Title: VP () Delete
Name: SHAMROCK, STEVE MR.
Address: PO BOX 3017
City-St-Zip: EUSTIS, FL 32727

Title: D () Delete
Name: TOMLINSON, HARRY MR.
Address: 36956 LAKE YALE DR
City-St-Zip: GRAND ISLAND, FL 32735

Title: S () Delete
Name: MCREE, JOAN MRS.
Address: PO BOX 1375
City-St-Zip: EUSTIS, FL 32727

Title: D () Delete
Name: HILBISH, ART MR.
Address: 34752 CATTAIL DR
City-St-Zip: EUSTIS, FL 32736

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
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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: SKIP HAYMANS

P

06/21/2007

Electronic Signature of Signing Officer or Director

Date