

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000036851

1. Entity Name
LAKE SHORE SOFTWARE & ENGINEERING, INC.



Principal Place of Business

**1205 PORTILLO COURT
DELTONA, FL 32725**

Mailing Address

**1205 PORTILLO COURT
DELTONA, FL 32725**



04112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3641230

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

**LANDT, BARBARA J
1205 PORTILLO COURT
DELTONA, FL 32725**

**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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**00000506269
04/27/06-80017-006 150.00**

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	LANDT, MICHAEL R
STREET ADDRESS	1205 PORTILLO CT.
CITY-ST-ZIP	DELTONA, FL 32725
TITLE	P
NAME	LANDT, BARBARA J
STREET ADDRESS	1205 PORTILLO CT.
CITY-ST-ZIP	DELTONA, FL 32725
TITLE	T
NAME	CLARKE, CAROL
STREET ADDRESS	7044 WRIGHT AVE
CITY-ST-ZIP	TANGERINE, FL 32777
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Barbara J Landt **Barbara J Landt**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/06

Date

407-302-2100

Daytime Phone