2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000088146

Entity Name: LAKE DOE COVE, INC.

City-St-Zip:

FILED Apr 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 232 S. DILLARD ST STE 201 WINTER GARDEN, FL 34787 **New Mailing Address: Current Mailing Address:** PO BOX 770609 WINTER GARDEN, FL 347770609 FEI Number: 59-3671997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLSTON, ROBERT W 232 S. DILLARD ST STE 201 WINTER GARDEN, FL 34787 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOLSTON, ROBERT W Name: Name: PO BOX 770609 Address: Address: City-St-Zip: WINTER GARDEN, FL 34777 City-St-Zip: Title: Title: () Delete () Change () Addition Name: JUNE, ROHLAND A II Name: PO BOX 770609 Address: Address: WINTER GARDEN, FL 34777 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition KAMINSKI, CHRISTOPHER L Name: Name: PO BOX 770609 Address Address: City-St-Zip: City-St-Zip: WINTER GARDEN, FL 34777 Title: () Delete Title: () Change (X) Addition SEDLOFF, JEFFREY A Name: Name: Address: Address: PO BOX 770609 City-St-Zip: City-St-Zip: WINTER GARDEN, FL 34777 Title: Title: () Delete () Change (X) Addition MAY, JACQUELINE M Name: Name: Address: Address: PO BOX 770609

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

WINTER GARDEN, FL 34777

SIGNATURE: ROHLAND A JUNE D 04/18/2006