


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

8/30/2005-90028-012-\$150.00-\$150.00

**FILED**  
**Sep 15, 2005 8:00 A.M.**  
**Secretary of State**

<b>DOCUMENT # P00000109456</b> 1. Entity Name <b>TORGAN LAKE, INC.</b>					
Principal Place of Business <b>143 BETTY DR PORT SAINT JOE, FL 32456</b>			Mailing Address <b>143 BETTY DR PORT SAINT JOE, FL 32456</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-3708092</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>KRAUSE, RICHARD W 143 BETTY DR PORT SAINT JOE, FL 32456</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>KRAUSE, RICHARD W 143 BETTY DR PORT SAINT JOE, FL 32456</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>FRANZEN, PATRICIA B 143 BETTY DR PORT SAINT JOE, FL 32456</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Richard W Krause</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>8/24/05</u> <u>850 899 7766</u> <small>Date Daytime Phone #</small>		

September 12, 2005

ATTACHMENT

66027383  
#P00000109456

Florida Department of State,  
Division of Corporations,  
Annual Reports Section,  
2670 Executive Center Circle,  
Suite 100,  
Tallahassee, FL 32301.

On September 6<sup>th</sup> I was notified that the annual reports submitted for Torgan Lake Enterprises (# P00000109456) and Second Life Enterprises (# P00000109461) we not being processed because they lacked the late fee assessment of \$400 each. The annual fee of \$150 each was, however, accepted. I am appealing the assessment of these late fees because we did not receive the annual notification from the Dept. of State prior to the May 1<sup>st</sup> deadline.

My wife, Patricia Franzen, contacted the Division of Corporations on August 22<sup>nd</sup> to inquire about the late charge because, when we had not received any renewal notification from the State, we had checked the Division web site and the annual report documents indicated the filing fee was \$150.00 which was due by September 7, 2005. This was done prior to the May 1<sup>st</sup> deadline. It was our assumption that the Division had instituted a staggered filing system and that, because our corporations began with the letters "S" and "T" that their filing date had been moved back to September. A copy of the document printed from the web site earlier in the year is attached.

A review of the records will show that we have filed timely and accurate annual reports since the inception of our corporations. This was our intent in this instance also, given that we filed on August 2<sup>nd</sup> for what we believed was a September 7<sup>th</sup> deadline. Therefore, we respectfully request the Division consider our circumstance and intent, and waive the \$400.00 late filing fee and dissolution for both Second Life Enterprises and Torgan Lake Enterprises.

Should you need to contact either my wife or me, we are available at (850) 899-7765 or (850) 899-7766, respectively.

Very Truly Yours,



Richard W. Krause  
Director