

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90089 046 ***150.00

DOCUMENT # P00000111657

1. Entity Name

MENENDEZ ENTERPRISES - LAKE CITY, INC.



Principal Place of Business

857 SW MAIN BLVD SUITE 100
LAKE CITY FL 32025

Mailing Address

508 SW EVERGREEN DRIVE
LAKE CITY FL 32025



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

1882 S. Ashe Ct

Suite, Apt. #, etc.

1882 S. Ashe Ct.

City & State

Auburn Alabama

City & State

Auburn Alabama

Zip

36830

Country

USA

Zip

36830

Country

USA

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-1071985

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WICKMAN & WYCKOFF, P.A.
4909 MANATEE AVENUE WEST
BRADENTON FL 34209

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME MENDENDEZ, RICHARD
STREET ADDRESS 508 SW EVERGREEN DRIVE
CITY-ST-ZIP LAKE CITY FL 32025

TITLE ST ☐ Delete
NAME MENDENEZ, KATHLEEN B
STREET ADDRESS 508 SW EVERGREEN DRIVE
CITY-ST-ZIP LAKE CITY FL 32025

TITLE VP ☐ Delete
NAME MENENDEZ, CHRISTINE
STREET ADDRESS 508 SW EVERGREEN DRIVE
CITY-ST-ZIP LAKE CITY FL 32025

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME Menendez, Richard
STREET ADDRESS 1882 S. Ashe Ct
CITY-ST-ZIP Auburn, AL 36830

TITLE ST ☒ Change ☐ Addition
NAME Menendez, Kathleen B.
STREET ADDRESS 1882 S. Ashe Ct.
CITY-ST-ZIP Auburn, AL 36830

TITLE VP ☒ Change ☐ Addition
NAME Menendez, Christine
STREET ADDRESS 1882 S. Ashe Ct.
CITY-ST-ZIP Auburn, AL 36830

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Richard Menendez Richard Menendez - 2-15-06 334 466-2010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #