

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000054241

FILED  
Mar 28, 2006  
Secretary of State

**Entity Name:** GENESIS ENTERPRISES OF LAKE LAND, INC.

**Current Principal Place of Business:**

10879 COUNTRY HAVEN DR.  
LAKE LAND, FL 338091121

**New Principal Place of Business:**

**Current Mailing Address:**

10879 COUNTRY HAVEN DR.  
LAKE LAND, FL 338091121

**New Mailing Address:**

**FEI Number:** 59-3724929

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

YOST, RONALD A E.A.  
411 SUWANNEE RD SE  
WINTER HAVEN, FL 33884 US

**Name and Address of New Registered Agent:**

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:**

Title: DP ( ) Delete  
Name: MILLS, DAVID  
Address: 10879 COUNTRY HAVEN DR.  
City-St-Zip: LAKE LAND, FL 338091121

Title: DV ( ) Delete  
Name: CREAMER, CHRISTINA  
Address: PO BOX 1293  
City-St-Zip: EATON PARK, FL 338401293

Title: DST ( ) Delete  
Name: YOST, RONALD A  
Address: 411 SUWANNEE RD SE  
City-St-Zip: WINTER HAVEN, FL 33884

**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:

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.

**SIGNATURE:** DAVID F. MILLS

PRES

03/28/2006

Electronic Signature of Signing Officer or Director

Date