

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000073863

Entity Name: MISS LAKE COUNTY, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

33719 IKE AVENUE
LEESBURG, FL 34788

New Principal Place of Business:

11403 LAKE EUSTIS DR
LEESBURG, FL 34788

Current Mailing Address:

33719 IKE AVENUE
LEESBURG, FL 34788

New Mailing Address:

11403 LAKE EUSTIS DR
LEESBURG, FL 34788

FEI Number: 59-3745646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBLISS, ANGELA L
33719 IKE AVENUE
LEESBURG, FL 34788 US

Name and Address of New Registered Agent:

CHAMBLISS, ANGELA L
11403 LAKE EUSTIS DR
LEESBURG, FL 34788 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:

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHAMBLISS, ANGELA L
Address: 33719 IKE AVENUE
City-St-Zip: LEESBURG, FL 34788

Title: V () Delete
Name: CHAMBLISS, DAVID P
Address: 33719 IKE AVENUE
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHAMBLISS, ANGELA L
Address: 11403 LAKE EUSTIS DR
City-St-Zip: LEESBURG, FL 34788

Title: V (X) Change () Addition
Name: CHAMBLISS, DAVID P
Address: 11403 LAKE EUSTIS DR
City-St-Zip: LEESBURG, FL 34788

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANGELA L CHAMBLISS

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date