2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT FILED DOCUMENT # P01000099112 Feb 27, 2006 08:00 AM 1. Entity Name **Secretary of State** LINDSEY REALTY & DEVELOPMENT CORP. Principal Place of Business Mailing Address 510 TIFFANY TERRACE PO BOX 6166 LAKELAND, FL 33813 LAKELAND, FL 33807-6166 01042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3749333 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent LINDSEY, GEORGE M III DO NOT WRITE 510 TIFFANY TERRACE LAKELAND, FL 33813 IN THIS SPACE 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS D TITLE NAME LINDSEY, GEORGE M III STREET ADDRESS **510 TIFFANY TERRACE** U00000449059 CITY - ST- ZIP LAKELAND, FL 33813 03/09/06-80039-020 150.W NAME LINDSEY, MARGARET V STREET ADDRESS 510 TIFFANY TERR CITY-ST-ZIP LAKELAND, FL 33813 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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 Chapter 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: Margaret V. Lindsen

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

125/06