

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025139

FILED
Apr 09, 2006
Secretary of State

Entity Name: CONSOLIDATED GROUP OF LAKE LAND INC.

Current Principal Place of Business:

5343 CLAY DRIVE
LAKE LAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

5343 CLAY DRIVE
LAKE LAND, FL 33813

New Mailing Address:

P. O. BOX 7173
LAKE LAND, FL 33807

FEI Number: 20-0774242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIXON, LEX SR.
5343 CLAY DRIVE
LAKE LAND, FL 33813 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: D () Delete
Name: DIXON, LEX SR.
Address: 5343 CLAY DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: P () Delete
Name: ORXON, LEX SR
Address: 5343 CLAY DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: VD () Delete
Name: TEETS, WILLIAM L
Address: 207 CHARLES STREET
City-St-Zip: LAKE LAND, FL 33803

Title: TD () Delete
Name: TITUS, KENNETH W
Address: 211 POINSETTA W
City-St-Zip: LAKE LAND, FL 33803

Title: SD () Delete
Name: BLANKS, KEVIN D
Address: 1114 PALMETTO ST E
City-St-Zip: LAKE LAND, FL 33803

Title: D () Delete
Name: DENNY, TAYLOR
Address: 1843 TRISTRAM STREET
City-St-Zip: LAKE LAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DIXON, LEX SR.
Address: 5343 CLAY DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: D (X) Change () Addition
Name: MATTHEWS, TOMMY
Address: 2456 HARTRIDGE POINT DR., W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HAMILTON, PAUL K
Address: 4170 DAVIS ROAD
City-St-Zip: MULBERRY, FL 33860

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: LEX D. DIXON SR.

P

04/09/2006

Electronic Signature of Signing Officer or Director

Date