

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Mar 13, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # P04000042385**

**1. Entity Name  
LITTLE LOST LAKE, INC.**



**Principal Place of Business  
11541 ROPER BLVD  
CLERMONT, FL 34711**

**Mailing Address  
11541 ROPER BLVD  
CLERMONT, FL 34711**



**02162006 No Chg-P CR2E034 (11/05)**

**4. FEI Number  
90-0146288**

**Applied For  
Not Applicable**

**5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**FELIX, CHARLES  
11541 ROPER BLVD  
CLERMONT, FL 34711**

**DO NOT WRITE  
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 re-staffing)

**DATE**

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

**9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
FELIX, JULIA  
11541 ROPER BLVD  
CLERMONT, FL 34711**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVST  
FELIX, CHARLES  
11541 ROPER BLVD  
CLERMONT, FL 34711**

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

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

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

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

**000000464450  
03/21/06-80116-011 150.00**

**DO NOT WRITE  
IN THIS SPACE**

**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 changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

*Charles Felix*

**3-9-06 352-242-0597**