2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2006 08:00 AN Secretary of State DOCUMENT # P04000043408 1. Entity Name LIME SINK DEVELOPMENT COMPANY, INC. Principal Place of Business Mailing Address 1184 MAYHAW LANE 1184 MAYHAW LANE CHIPLEY, FL 32428 CHIPLEY, FL 32428 04252006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3793871 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SASSER, MARVIN W DO NOT WRITE 1184 MAYHAW LANE CHIPLEY, FL 32428 IN THIS SPACE 3. 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 sepretation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS MLE NAME SASSER, MILLARD C STREET ADDRESS 1184 MAYHAW LANE CITY-ST-ZIP CHIPLEY, FL 32428 TITLE VD NAME HAYS, THOMAS U00000535990 STREET ADDRESS 1184 MAYHAW LANE 05/08/06-80076-008 150.00 City-St-ZiP CHIPLEY, FL 32428 STD TITLE SASSER, MARVIN W NAME STREET ADDRESS 1184 MAYHAW LANE DO NOT WRITE CITY-ST-ZIP CHIPLEY, FL 32428 TITLE IN THIS SPACE HAYS, MAMMIE NAME STREET ADDRESS 1184 MAYHAW LANE CITY-ST-ZIP CHIPLEY, FL 32428 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 cath; 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.

ph. 850-638-4134

FILED