

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067654

FILED
Mar 14, 2005
Secretary of State

Entity Name: LAKE SEBRING ESTATES DEVELOPMENT, CORP.

Current Principal Place of Business:

393 CR 17A WEST
AVON PARK, FL 33825 US

New Principal Place of Business:

Current Mailing Address:

393 CR 17A WEST
AVON PARK, FL 33825 US

New Mailing Address:

FEI Number: 20-1065456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAFF, TULA M ESQUIRE
3399 CYPRESS GARDENS ROAD
SUITE C
WINTER HAVEN, FL 33884 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: P () Delete
Name: FORMAN, R.
Address: 393 CR 17A WEST
City-St-Zip: AVON PARK, FL 33825 US

Title: VP () Delete
Name: CLARKE, ROBERT
Address: 393 CR 17A WEST
City-St-Zip: AVON PARK, FL 33825 US

Title: S/T (X) Delete
Name: ESPOSITO, JOSEPH
Address: 111 6TH STREET NW
City-St-Zip: WINTER HAVEN, FL 33881 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: FORMAN, R.
Address: 393 CR 17A WEST
City-St-Zip: AVON PARK, FL 33825 US

Title: VPS (X) Change () Addition
Name: CLARKE, ROBERT
Address: 393 CR 17A WEST
City-St-Zip: AVON PARK, FL 33825 US

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

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: R. FORMAN

PT

03/14/2005

Electronic Signature of Signing Officer or Director

Date