2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000075654

1. Entity Name

TAYLOR & TAYLOR OF LAKE COUNTY, INC.



FILED
May 18, 2006 08:00 All
Secretary of State

Principal Place of Business

Mailing Address

43111 W. 4TH STREET PAISLEY, FL 32767 US

43111 W. 4TH STREET PAISLEY, FL 32767 US



05152006

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1104750 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PINNER, TAYLOR B 43111 W. 4TH STREET PAISLEY, FL 32767

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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: (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOWIII FEE IS \$150.00 9. Election Campaign Finar Due by September 6, 2006 Trust Fund Contribution.			\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
	OFFICERS AND DIR	ECTORS I				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PINNER, TAYLOR B 43111 W. 4TH STREET PAISLEY, FL 32767					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PINNER, BRIAN T 43111 W. 4TH STREET PAISLEY, FL 32767				U00000564988 05/20/06-80098-018 150. 00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PINNER, TAYLOR B 43111 W. 4TH STREET PAISLEY, FL 32767			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PINNER, TAYLOR B 43111 W. 4TH STREET PAISLEY, FL 32767			IN THIS SPACE		
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STREET ADDRESS CITY-ST-ZIP	august Dear				maker y vel	
12. I bereby 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						

12. I hereby certify that the information supplied with this filling 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(38C) 804-814L

5/15/06