

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000105693

FILED
Apr 27, 2009
Secretary of State

Entity Name: IDEAL MANAGEMENT SERVICES OF LAKE LAND, INC.

Current Principal Place of Business:

PO BOX 56
616 N MAYO STREET
CRYSTAL BEACH, FL 34681

New Principal Place of Business:

616 NORTH MAYO STREET
CRYSTAL BEACH, FL 34681

Current Mailing Address:

PO BOX 56
616 N MAYO STREET
CRYSTAL BEACH, FL 34681

New Mailing Address:

FEI Number: 20-1345236 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DINGESS, ROBERT L
616 N MAYO STREET
CRYSTAL BEACH, FL 34681 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: CEO () Delete
Name: DINGESS, ROBERT L
Address: PO BOX 56
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: MGR () Delete
Name: MARTINS, JOSEPH
Address: 419 ORIOLE CIRCLE
City-St-Zip: PALM HARBOR, FL 34683

Title: T () Delete
Name: DINGEES, SHERRY L
Address: P.O. BOX 56
City-St-Zip: CRYSTAL BEACH, FL 34681

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT DINGESS

DIR

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date