

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Mar 01, 2007
Secretary of State**

DOCUMENT# P04000152597

Entity Name: LAKE IN THE WOODS, INC.

Current Principal Place of Business:

6915 S.R. 54
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

9816 COMPASS POINT WAY
TAMPA, FL 33615

Current Mailing Address:

6915 S.R. 54
NEW PORT RICHEY, FL 34653

New Mailing Address:

9816 COMPASS POINT WAY
TAMPA, FL 33615

FEI Number: 59-3788660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLACKWELL, GARY L
6915 S.R. 54
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

WEINER, MERRICK J
9816 COMPASS POINT WAY
TAMPA, FL 33615 US

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: MERRICK J WEINER 03/01/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BLACKWELL, GARY L
Address: 6915 S.R. 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D (X) Delete
Name: WALLACE, ALAN R
Address: 3917 EAGLE FLIGHT LANE
City-St-Zip: LAND A LAKES, FL 34639

Title: P (X) Delete
Name: BLACKWELL, GARY L
Address: 6915 S.R 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP (X) Delete
Name: WALLACE, ALAN R
Address: 3917 EAGLE FLIGHT LANE
City-St-Zip: LAND A LAKES, FL 34639

Title: ST (X) Delete
Name: OLSON, JACQUELINE L
Address: 6915 S.R 54FLIGHT LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: WEINER, MERRICK J
Address: 9816 COMPASS POINT WAY
City-St-Zip: TAMPA, FL 33615

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

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 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: MERRICK J WEINER DPST 03/01/2007
Electronic Signature of Signing Officer or Director Date