2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# P06000029669

Entity Name: L3C, INC.

Current Principal Place of Business:

265 HWY 98 NORTH
OKEECHOBEE, FL 34974

New Principal Place of Business:

265 HWY 98 NORTH
OKEECHOBEE, FL 34972

Current Mailing Address:

265 HWY 98 NORTH
OKEECHOBEE, FL 34974

New Mailing Address:

265 HWY 98 NORTH
OKEECHOBEE, FL 34972

FEI Number: 20-4150433 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEHMAN, BETH
265 HWY 98 NORTH
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

LEHMAN, BETH
265 HWY 98 NORTH
OKEECHOBEE, FL 34972 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: _____ 01/15/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LEHMAN, EDWARD
Address: PO BOX 2818
City-St-Zip: OKEECHOBEE, FL 34973

Title: D ( ) Delete
Name: LEHMAN, BETH
Address: PO BOX 2818
City-St-Zip: OKEECHOBEE, FL 34973

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BETH W. LEHMAN D 01/15/2008
Electronic Signature of Signing Officer or Director — Date