## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000105741

FILED Jan 04, 2008 Secretary of State

Entity Name: C G FOOD & GAS OF LAKE COUNTY I	INC	
Current Principal Place of Business:	New Principal Place of Business:	
533 E ROSEWOOD LANE TAVARES, FL 32778	1248 WELLS AVE TAVARES, FL 32778	
Current Mailing Address:	New Mailing Address:	
533 E ROSEWOOD LANE TAVARES, FL 32778		
FEI Number: 20-5374757 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
WEILHEIMER, WINSTON 206 S SPRING GARDEN AVE DELAND, FL FL US		
The above named entity submits this statement for the pin the State of Florida.	ourpose of changing its registered office or registered agent, or both	,
SIGNATURE:		
Electronic Signature of Registered Age	ent Date	
Election Campaign Financing Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS:
Title: D ( ) Delete	Title: D (V) Channe ( ) Addition	

Title: Title: (X) Change ( ) Addition GOYAL, PREM LATA CHAWLA, SULOCHNA Name: Name: 3965 BLACK BURN WAY 533 E ROSEWOOD LNA Address: Address: City-St-Zip: DULUCH, GA 33096 City-St-Zip: TAVARES, FL 32778 Title: () Delete Title: (X) Change ( ) Addition CHAWLA, ALIL CHAWLA, ANIL Name: Name: Address: 1149 SYDNEY COLD CIRCLE Address: 533 E ROSEWOOD LNA LAWRENCEVILLE, GA 30045 TAVARES, FL 32778 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete

Name: CHAWLA, SULOCHNA Name: CHAWLA, AMIT Address: 1149 SYDNEY COLD CIRCLE Address: 533 E ROSEWOOD LNA City-St-Zip: LAWRENCEVILLE, GA 30045 City-St-Zip: TAVARES, FL 32778

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: AMIT CHAWLA 01/04/2008 D