

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000097188

FILED
Mar 13, 2009
Secretary of State

Entity Name: REFERRAL AGENTS OF LAKE COUNTY INC.

Current Principal Place of Business:

2574 TREMONT DRIVE
EUSTIS, FL 32726

New Principal Place of Business:

34020 PARKVIEW DR
EUSTIS, FL 32736

Current Mailing Address:

2574 TREMONT DRIVE
EUSTIS, FL 32726

New Mailing Address:

34020 PARKVIEW DR
EUSTIS, FL 32736

FEI Number: 30-0511161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAGGIANO, VERONICA
2574 TREMONT DRIVE
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

BERRY, EVANGELINE
34020 PARKVIEW DR.
EUSTIS, FL 32736 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: EVANGELINE BERRY

03/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: CAGGIANO, VERONICA
Address: 2574 TREMONT DRIVE
City-St-Zip: EUSTIS, FL 32726

Title: S () Delete
Name: CAGGIANO, VERONICA
Address: 2574 TREMONT DRIVE
City-St-Zip: EUSTIS, FL 32726

Title: DVP () Delete
Name: BERRY, VANGIE
Address: 34020 PARKVIEW AVE.
City-St-Zip: EUSTIS, FL 32736

Title: T () Delete
Name: BERRY, VANGIE
Address: 34020 PARKVIEW AVE.
City-St-Zip: EUSTIS, FL 32736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: BERRY, EVANGELINE
Address: 34020 PARKVIEW DR.
City-St-Zip: EUSTIS, FL 32736

Title: A/P (X) Change () Addition
Name: BERRY, EARL
Address: 34020 PARKVIEW DR.
City-St-Zip: EUSTIS, FL 32736

Title: S (X) Change () Addition
Name: BERRY, EVANGELINE
Address: 34020 PARKVIEW AVE.
City-St-Zip: EUSTIS, FL 32736

Title: T (X) Change () Addition
Name: BERRY, EARL
Address: 34020 PARKVIEW AVE.
City-St-Zip: EUSTIS, FL 32736

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: EVANGELINE BERRY

D

03/13/2009

Electronic Signature of Signing Officer or Director

Date