

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000058886

1. Entity Name

LAKE JUDY LEE CORPORATION, INC.



Principal Place of Business

1715 EAST BAY DRIVE
LARGO, FL

Mailing Address

418 MIDWAY ISLAND
CLEARWATER BEACH, FL 33767 US



02022006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3200638	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HAYES, ELIZABETH
418 MIDWAY ISLAND
CLEARWATER BEACH, FL 33767

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

U00000447103
03/08/06-80041-008 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	STEHLE, MANFRED
STREET ADDRESS	WALDRING 3
CITY-ST-ZIP	76337 WALDBRONN, GERMANY,

TITLE	STD
NAME	HAYES, ELIZABETH
STREET ADDRESS	418 MIDWAY ISLAND
CITY-ST-ZIP	CLEARWATER, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELIZABETH F. HAYES 3/14/06

Daytime Phone #