FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000052543 (3)

THE LAKE COLONY, INC.

Principal Place of Business Mailing Address

811 N. WYMORE ROAD
WINTER PARK FL 32789 WINTER PARK FL 32789-2856

FILED Apr 25 1997 8:00am Secretary of State



3a. Date of Last Report

05/17/1996

3. Date Incorporated or Qualified

07/15/1994

| 2. Principal Place of Bu | siness | 2a. Mailing Address | | | 4. FEI Number | IAn | plied For |
|---|-------------------------------------|------------------------------------|-----------------------|---|---|------------------|--------------|
| 21 | | 26 | | | E0-3080468 | | t Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 30 0202400 | \$8.75 | | |
| 22 | | 27 | | 5. Certificate of Status Desired | Fee Re | | |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 23 | | 28 | | Trust Fund Contribution | Added 1 | to Fees | |
| Zip | Country Zip | | Country | | 8. This corporation has liability for intangit | le tax under s | . 199.032, |
| 24 | 25 29 30 | | 30 | Florida Statutes Yes No | | | |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registers | d Agent | |
| BANKS, E.G. 611 N. WYMORE ROAD | | | | 1) Name | | | |
| | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| WINTER PARK FL 32789 | | | ١٥ | 2 Street Addi | ress (P.O. Box radificer is not Acceptable) | | |
| | | | 8 | 3 | | | |
| | | | | 1 | | | |
| | | | 8 | 4 City | F | L 85 Zip (| Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered | | | | | | | |
| office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | |
| | | | | | | | |
| SIGNATURE Signalure, ty | and or printed name of registered a | gent and trie if applicable (NO1 | E Registered A | gent signature requir | red when reinstating) DATE | | |
| 12. | OFFICERS AI | ND DIRECTORS | 13. | 7 | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECTOR | IS IN 12 |
| TITLE D | , | DELETE | 1.1 TITLE | | | Change | Addition |
| NAMÉ BANK | S. E.G. | 12 | | E | | | 1 |
| | WYMORE ROAD | | | ET ADDRESS | | | 13 |
| | WINTER PARK FL 32789 | | 1.4 CITY | 1 | • | | 1 |
| TITLE D | (1) THILL DELOG | ☐ DELETE | 2.1 TITLE | | | Change | Addition |
| 1 ' | CLAYTON, W. MALCOLM | | 2.2 NAM | 1 | | | |
| | WYMORE ROAD | | 1 | 1 | | | 1 |
| 1 | | | | ET ADDRESS | | | 1 |
| | WINTER PARK FL 32789 | | 2 4 CITY 3.1 TITLE | | ······································ | ☐ Change | Addition |
| | | | - E | | | in charge | L. Addition |
| | ON, CHARLES W III | | 3.2 NAM | 1 | | | |
| | WYMORE ROAD | | 4 | ET ADDRESS | | | |
| | R PARK FL 32789 | 77 67 | | -ST-ZIP | | | 14400- |
| TITLE | ☐ DEL€TE | | 4.1 TITLE | 1 | | Change | ☐ Addition |
| NAME | | | 4 2 NAM | E [| | | |
| STREET ACCORESS | | | 4.3 STRE | ET ADDRESS | | | |
| CHY-SI-ZIF | | | 4.4 CITY | -ST-ZIP | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 5.2 NAM | Ε | | | |
| STREET ADDRESS | | | 5.3 STRE | ET ADORESS | | | |
| CITY-S1-ZIP | | | 5.4 CITY | -ST-ZIP | | | |
| TITLE | | DELETE | 6.1 TITLE | | | Change | Addition |
| NAME | 1 6 | | 6,2 NAM | £ | | _ | |
| STREET ADDRESS | | | 4 | ET ADDRESS | | | 1 |
| 1 | | | | | | | Ţ |
| 6/TY ST-ZIP | hat the information suppli | ed with this filing does not quali | 6.4 CITY | | d in Section 119.07(3)(i), Florida Statutes. I furt | ner certify that | the |

I do nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

4/17/97

(407) 6446000