

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000088657

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** SEBRING LAKESIDE GOLF RESORT, INC.

**Current Principal Place of Business:**

1062 LAKE SEBRING DRIVE  
SEBRING, FL 33870

**New Principal Place of Business:**

1062 LAKE SEBRING DRIVE  
SEBRING, FL 33870 UN

**Current Mailing Address:**

1062 LAKE SEBRING DRIVE  
SEBRING, FL 33870

**New Mailing Address:**

1062 LAKE SEBRING DRIVE  
SEBRING, FL 33870 UN

**FEI Number:** 65-0650761

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAKER, MARK L  
1062 LAKE SEBRING DRIVE  
SEBRING, FL 33870 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: BAKER, MARK L  
Address: 1062 LAKE SEBRING DRIVE  
City-St-Zip: SEBRING, FL 33870 UN

Title: VSD  
Name: BAKER, MARIA C  
Address: 1062 LAKE SEBRING DRIVE  
City-St-Zip: SEBRING, FL 33870 UN

I hereby 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 all other like empowered.

SIGNATURE: MARK L BAKER

PRES

04/29/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date