2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000000806

Name:

Title:

Name:

Address:

City-St-Zip:

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ELSWICK, SHANNON

1414 KUHL AVE., MP 1

ORLANDO, FL 32806

FILED Apr 06, 2005 Secretary of State

Entity Nai	ne: LAKE H	IGHLANDS ASSOCIATE	ES, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
1414 KUH ORLANDO	L AVE), FL 32806						
Current Mailing Address:				New Mailing Address:			
	L AVE MP2), FL 32806						
FEI Number:	: 59-3372100	FEI Number Applied Fo	or () FEI Nur	nber Not Appl	icable ()	Certificate of Status Des	ired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SUITE 600 ORLANDO The above	BINSON STF)), FL 32801 named entity e of Florida.	US	for the purpose c	of changing it	s registere	d office or registered ager	nt, or both,
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financi	ng Trust Fund Contribution	().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	DST (GOLDSTEIN, 1414 KUHL A ORLANDO, F	VE., MP 2		Title: Name: Address: City-St-Zip:	DST GOLDSTEIN 1414 KUHL ORLANDO,	*	
Title: Name: Address: City-St-Zip:	D (HODGES, KA 1414 KUHL A ORLANDO, F	VE., MP 71		Title: Name: Address: City-St-Zip:		(X) Change ()Addition KARL AVE., MP 71 FL 32806 US	
Title:	DP () Delete		Title:	С	(X) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL A GOLDSTEIN DST 04/06/2005

(X) Change () Addition

() Change (X) Addition

ELSWICK, SHANNON

HARR, STEPHÉN

DP

1414 KUHL AVE., MP 1

ORLANDO, FL 32806 US

1414 KUHL AVENUE, MP 2

ORLANDO, FL 32806 US