

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000027073

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** LAKES TRAVEL, INC.

**Current Principal Place of Business:**

32747 MICHIGAN AVE  
SAN ANTONIO, FL 33576

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 293  
SAN ANTONIO, FL 33576

**New Mailing Address:**

**FEI Number:** 59-3370476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMERILAWYER CHARTERED  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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: PSD  
Name: NOVAK, MICHAEL W  
Address: 32747 MICHIGAN  
City-St-Zip: SAN ANTONIO, FL 33576

Title: T  
Name: NOVAK, ALICE  
Address: 32747 MICHIGAN AVE  
City-St-Zip: SAN ANTONIO, FL 33576

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: MICHAEL NOVAK

PRES

04/11/2012

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

\_\_\_\_\_  
Date