

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000040405

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** THE MAGNOLIA CORPORATION OF LAKE COUNTY

**Current Principal Place of Business:**

101 S 11TH ST  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6064  
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

8110 COUNTY ROAD 44 LEG A  
LEESBURG, FL 34788 US

**FEI Number:** 59-3376853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PUGLIA, JACQUELYN E  
1516 ISLAND GREEN DRIVE  
MIRAMAR BEACH, FL 32550 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: D  
Name: PUGLIA, JACQUELYN E  
Address: P.O. BOX 6064  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D  
Name: ISMAIL, AKRAM  
Address: 8100 COUNTY RD 44, LEG A  
City-St-Zip: LEESBURG, FL 34788

Title: CFO  
Name: ISMAIL, ISMAIL A  
Address: 8110 COUNTY ROAD 44 LEG A  
City-St-Zip: LEESBURG, FL 34788

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: ISMAIL A. ISMAIL, RPH

CFO

04/25/2012

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

\_\_\_\_\_  
Date