2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2004 08:00 AM Secretary of State

| | | | | , | | Sacre | MOPE A | af Ctr |)tα |
|---|--|-----------------------------|---|--|--|-----------------------|-----------------|----------------|----------------------------|
| DOCUMENT # P96000096502 1. Entity Name LAKE FOREST OF PORT CHARLOTTE, INC. | | | | | | Secre | etary (| n ste | iic |
| Principal Plac | e of Business | Mailing Address | | | _ | | | | |
| _ | | | | | | | | | |
| 3491 Tamiami Trail 3491 Tamiami Trai Port Charlotte, Fl 33952 Port Charlotte, F | | PORT CHARLOTTE, FL | 22052 | | | | | | |
| PUNI UNANE | Offic, FL 33332 | FUNI CHARLOTTE, FL | 3333 <u>2</u> | | | | | | |
| | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 03012004 | Chg-P | CR2E034 | | 1 1 m | |
| City & State | | City & State Zip Country | | | 4. FEI Number 65-0717 | | | No | plied For x Applicable |
| Zip | Country Zip Co | | Coun | ary | 5. Certificate of Status Desired S8.75 Additional Fee Required | | | | |
| 6. Name and Address of Current Registered Agent | | | | | 7. Name and A | Address of New R | egistered Ag | ent | |
| KEDZIORA, JOHN | | | | Name | | | | | |
| 3491 TAMIAMI TRAIL PORT CHARLOTTE, FL 33952 | | | | Street Address (| P.O. Box Number | is Not Acceptable | ·} | | |
| | | | | | | | - | | |
| | | | | City | | | FL | Zip Code | |
| | named entity submits this statement for tions of registered agent. | the purpose of changing its | registere | ed office or register | ed agent, or both | , in the State of Fic | rida. I am far | niliar with, | and accept |
| SIGNATURE Signature, typed or printed name of registered agent and site if applicable (NOTE Registered Agent signature required when refinaliting) DATE | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550,00 9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution. Added to Fees | | | | | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. | | ADDITIONS/C | HANGES TO OFF | CERS AND D | RECTORS | 3 IN 11 |
| ITLE | P Delete | | | | | · | | Change | Addition |
| NAME. | KEDZIORA, JOHN | | NAM | ٤ | | Haaaa | กกรถรว | | |
| STREET ADDRESS | · · · · · · · · · · · · · · · · · · · | | | ET ADDRESS | U00000090322 03/17/04-80012-012 150.00 | | | | |
| CITY-ST-ZIP | PORT CHARLOTTE, FL 33952 | | CHA | -ST-ZIP | | 03/1//01 | OOQ1E | <u> </u> | , |
| TATLE | ST | ☐ Deleta | TITLE | = | | | | Change | Addition |
| NAME | KEDZIORA, JADWIGA | | NAM | E | | | | | |
| STREET ADDRESS | 0.07 | | | ET ADORESS | | | | | |
| City-SI-ZIP | PORT CHARLOTTE, FL 33952 | -57 - ZIP | | | | | | | |
| TITLE | 1 | | | | | <u> </u> | | | |
| TATLE | | Delete | TATLE | | | | | Change | Addition |
| NAME | | ☐ Delete | NAM | ŧ | | <u> </u> | Ε | Change | ☐ Addition |
| NAME STREET ADDRESS | | ☐ Delete | nami Stre | ET ADDRESS | | <u></u> | ξ. |] Change | ☐ Addition |
| NAME | | | nami Stre | ŧ | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE | | □ Delete | NAMI STRE CITY- TITLE | E ADDRESS -ST-ZIP | | | | Change | ☐ Addition |
| NAME STREET ADDRESS GITY-SI-ZIP TITLE NAME | | | NAMI STRE CHY- TITLE NAMI | E ADDRESSST-ZIP | | | | | |
| NAME STREET ADDRESS GITY-SI-ZIP TITLE NAME STREET ADDRESS | | | NAMI STRE CITY TITLE NAMI STRE | E E ADDRESS -ST-ZIP : E E EI ADDRESS | | | | | |
| NAME STREET ADDRESS GITY-SI-ZIP TITLE NAME | | 🗀 Delete _ | NAMI STRE CHTY TITLE NAMI STRE CHTY | E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP | | | Ţ |] Change | ☐ Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CCTY-SI-ZIP TITLE | | | NAMI STRE CITY: TITLE NAMI STRE CITY: | E EI ADDRESS -ST-ZIP E EI ADDRESS -ST-ZIP | | | Ţ | | |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CSTY-SI-ZIP TITLE NAME | | 🗀 Delete _ | NAME STREE CHY- TITLE NAME STREE CHY- TITLE NAME | E E ADDRESS -SI-ZIP E E EI ADDRESS -SI-ZIP E E E E E E E E E E E E E E E E E E E | | | Ţ |] Change | ☐ Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | | 🗀 Delete _ | NAMI STRE CHY- TITLE NAMI STRE NAMI STRE | E E ADDRESS -ST-ZIP E E ADDRESS -ST-ZIP E E ADDRESS -ST-ZIP E E ADDRESS - | | | Ţ |] Change | ☐ Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CXTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP | | ☐ Deteite _ ☐ Deteite | NAMA STREE CITY- TITLE NAMA TITLE NAMA STREE CITY- | E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E-ST-ZIP E -ST-ZIP -ST-ZIP | | | | Change Change | Addition Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS COTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE | | 🗀 Delete _ | NAMM STRE CHY- TITLE NAMM STRE CHY- TITLE NAMM STRE CHY- TITLE TITLE TITLE TITLE TITLE TITLE | E ET ADDRESS -ST-ZIP E E LI ADDRESS -ST-ZIP E E ST-ZIP E ST-ZIP | | | |] Change | ☐ Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CATY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME | | ☐ Deteite _ ☐ Deteite | NAMM STRE CHY- TITLE NAMM STRE CHY- TITLE NAMM STRE CHY TITLE NAMM STRE CHY TITLE NAMM | E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E | | | | Change Change | Addition Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS | | ☐ Deteite _ ☐ Deteite | NAMM STRE CHY TITLE NAMM STRE CHY TITLE NAMM STRE CHY TITLE NAMM STRE CHY TITLE NAMM STRE STRE | E ET ADDRESS -ST-ZIP E E ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E ET ADDRESS | | | | Change Change | Addition Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP | | ☐ Delete ☐ Delete ☐ Delete | NAME STREE CUTY TUTLE NAME STREE NAME STREE CUTY TUTLE NAME STREE NAME CUTY TUTLE NAME CUTY TUTLE NAME CUTY | E ET ADDRESS -ST-ZIP E E ET ADDRESS | Alex 140 Office | | [| Change Change | Addition Addition |
| NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP | certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attact finent with an address, w | Delete Delete Delete | NAMM STRE CITY TITLE NAMM STRE THE THE THE THE THE THE THE THE THE TH | E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP | toma lengt offer | an it made under d | Lurther certify | Change Change | Addition Addition Addition |