2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000086461

1. Entity Name J.P. LAKE, INC.



A CU HARY OF STATE HISTON OF CORPORATIO

06 MAR 15 AM 10:58

Principal Place of Business

2851 REMINGTON GREEN CIR., STE. D TALLAHASSEE, FL 32308 Mailing Address

2851 REMINGTON GREEN CIR., STE. D TALLAHASSEE, FL 32308



DO NOT WRITE IN THIS SPACE

02022006 No Chg-P CR2E

CR2E034 (11/05)

4. FEI Number 59-3538195

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

BITTMAN, MICHAEL J 301 E. PINE ST STE 1400 ORLANDO, FL 32801

## DO NOT WRITE IN THIS SPACE

the obligations	ions of registered agent.				th, in the State of Florida. I am familiar with, and accept	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Trust Fund Contribu			ncing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MITCHELL, JOSEPH D 2851 REMINGTON GREEN CIR., STE TALLAHASSEE, FL 32308	:. D		900068558209 03/24/0601004021 **150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST FARMER, C. GUY 2851 REMINGTON GREEN CIR., STE TALLAHASSEE, FL 32308	E. D		U3/24/UbU1UU4U21 **15U.UU		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

O. G. FARMER A

3/12/06

850-386-2522