


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000065146</b>	
1. Entity Name <b>LAKE HART, INC.</b>	
	
Principal Place of Business <b>5511 HANSEL AVE ORLANDO, FL 32809</b>	Mailing Address <b>5511 HANSEL AVE ORLANDO, FL 32809</b>



04222008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3588933</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**RUSSELL, DOUGLAS R  
5511 HANSEL AVE  
ORLANDO, FL 32809**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	BURDEN, RANDY O
STREET ADDRESS	1611 S. SUMMERLIN AVE.
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	D
NAME	HOOKE, DOUGLAS P
STREET ADDRESS	5511 HANSEL AVE.
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	D
NAME	RUSSELL, DOUGLAS R
STREET ADDRESS	5511 HANSEL AVE.
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	D
NAME	SECRIST, ROBERT L III
STREET ADDRESS	5511 HANSEL AVE
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/08

Date

407/851-1577

Daytime Phone #