## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

SIGNATURE:

## FILED Mar 06, 2004 08:00 AM DOCUMENT # P99000069121 **Secretary of State** 1. Entity Name LAKESIDE FRUIT COMPANY, INC. Principal Place of Business Mailing Address 1520 NORMANDY WAY 1520 NORMANDY WAY LEESBURG, FL 34748 LEESBURG, FL 34748 03012004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3596009 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JAMES, EDWARD A DO NOT WRITE 1520 NORMANDY WAY LEESBURG, FL 34748 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 renetating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000079723 Trust Fund Contribution. Added to Fees 03/08/04-80080-nos (5n.nn OFFICERS AND DIRECTORS 10. PTS TITLE JAMES, EDWARD A NAME STREET ADDRESS 1520 NORMANDY WAY LEESBURG, FL 34748 CITY-ST-ZIP DHE NAME STREET ADDRESS C(1Y-S(-7)P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP MALIF STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 entress with all other like empowered.

. James