. 2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P99000069121 1. Entity Name LAKESIDE FRUIT COMPANY, INC.

FILED Jan 16, 2007 08:00 AN Secretary of State

1520 NORM	incipal Place of Business Mailing Address 520 NORMANDY WAY 1520 NORMANDY ESBURG, FL 34748 LEESBURG, FL 34						
DO NOT WRITE IN THIS SPACE				01112007 4. FEI Numb 59-359	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
JAMES, EDWARD A 1520 NORMANDY WAY LEESBURG, FL 34748				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 8 applicable (NOTE. Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing .	\$5.00 May Be Added to Fees			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PTS JAMES, EDWARD A 1520 NORMANDY WAY LEESBURG, FL 34748	CTORS			ungggg56 ()1/16/07- 8 0	5990 0030-923 150.00	
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CITY-ST-ZIP	A						

12. I hereby certify that the information supplied with this filling 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 end 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 addition, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR