2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000087199

Entity Name: B&W OF LAKE COUNTY, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 41 TARPON CIRCLE WINTER SPRINGS, FL 32708 **Current Mailing Address: New Mailing Address:** 41 TARPON CIRCLE WINTER SPRINGS, FL 32708 FEI Number: 59-3687945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROACH, REX R 41 TARPON CIRCLE WINTER SPRINGS, FL 32708 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ROACH, REX R Name: Name: 41 TARPON CIRCLE Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ROACH, ERIC G Name: 36330 LAKE NORRIS ROAD Address: Address: City-St-Zip: EUSTIS, FL 32720 City-St-Zip: () Delete Title: Title: () Change () Addition ROACH, GREGORY A Name: Name: 36330 LAKE NORRIS ROAD Address: Address: City-St-Zip: EUSTIS, FL 32720 City-St-Zip: Title: () Delete Title: () Change () Addition ROACH, KEVIN T Name: Name: Address: 36330 LAKE NORRIS ROAD Address: City-St-Zip: EUSTIS, FL 32720 City-St-Zip: Title: Title: () Delete () Change () Addition ROACH, GARY M Name: Name: 561 CALIBRE CREST PARKWAY, APT. 205 Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: Title: () Delete Title: () Change () Addition HUDSON, VICKIE M Name: Name: 936 PINFIELD COVE Address: Address: City-St-Zip: City-St-Zip: SANFORD, FL 32773

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REX R. ROACH D 04/28/2005