## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # S81244**

1. Entity Name

LARK INTERNATIONAL ENTERPRISES, INC.



**FILED** Mar 29, 2007 08:00 A Secretary of State

Principal Place of Business

**6 OAKMONT CIRCLE** ORMOND BEACH, FL 32174 Mailing Address

**6 OAKMONT CIRCLE** ORMOND BEACH, FL 32174



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01102007 No Chg-P

Applied For 4. FEI Number 59-3076256 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

KELLER, LYNN R. **6 OAKMONT CIRCLE** ORMOND BEACH, FL 32174 IN THIS SDACE

8. The above	named entity submits this statement for the p	urpose of changing its regist	ered office or re	gistered agent, or boll	h, in the State of Florida. I am familiar with, and accept
	tions of registered agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and title it	applicable (NOTE Registe	ered Agent signature i	equired when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fin     Trust Fund Contribution		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			The state of the s
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KELLER, LYNN R. 6 OAKMONT CIRCLE ORMOND BEACH, FL				Unnonné se sé s
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KELLER, RICHARD W. 2216 WINSLOW CIR CASSELBERRY, FL 32707		E poli		04/05/07-80011-020 150.0
TITLE NAME				yer min e	and the second of the second o

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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 emocwered 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 the empowered.

SIGNATUR	┏.

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

LYNN R KELLER