2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V02939

1. Entity Name
LAKE MARY PROPERTIES, INC.



FILED Feb 03, 2006 08:00 AM Secretary of State

Principal Place of Business

951 GREENWOOD BLVD. LAKE MARY, FL 32746 Mailing Address

THOMAS L WHITEHOUSE 9709 SMITH RD WAITE HILL, OH 44094

US



DO NOT WRITE IN THIS SPACE

01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 34-1810738 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

While he

WHITEHOUSE, JON L 2805 GLYN STREET ORLANDO, FL 32807

SIGNATURE:

DO NOT WRITE IN THIS SPACE

28/16

5556 -120-100

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 Igmiliar with, and accept the obligations of registered agent. SIGNATURE						
Signature, typed or printed instruction and regulated agent and title if applicable. (NOTE: Registered Agent arginiture required when retreating) DATE						
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.			sing 🔲	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CXTY-ST-ZIP	PT WHITEHOUSE, THOMAS L 9709 SMITH ROAD WAITE HILL, OH 44094					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SLIVKA, JOHN M 925 EUCLID AVENUE, SUITE 2000 CLEVELAND, OH 44115		000000417167 02/13/05-80043-021 150.00 DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WHITEHOUSE, JONATHAN L 2805 GLYN ST ORLANDO, FL 32807					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WHITEHOUSE, TIMOTHY L 234 MAURAN AVE, APT #2 EAST PROVIDENCE, RI 02914			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_					
TITLE NAME STREET ADDRESS CHY-ST-ZIP						
12. I hereby certify that the information supplied with this Illing 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.						

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SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR