## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V18318

(8)

LAKE BEAN COMPANY, INC.

Principal Place	e of Business	Mailing Address	<u>,                                    </u>	3 (60)1 0(100) (100) 10100 (110) 10101 100)	OLDIA BIBIL AIDII BISII BIBIL BIBIL IBBI
650 STATE MARKET ROAD PAHOKEE FL 33476 US		PAHAKEE FL 33478		DO NOT WRITE	IN THIS SPACE
•				3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Address		03/09/1992 4. FEI Number	Applied For
21 Principal P	Ido <del>e</del> di Dusiriess	26 1798 East Mai	in Ctroat	65-0319242	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	III prieer	- '	SR 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		Pahokee, F1.	33476	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pair	
24	25	<del></del>	30	Personal Property Tax due June	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	listered Agent
TH	OMPSON, JOEY L.		81 Name	THOMPSON, JOEY L.	
585 1/2 EAST MAIN STREET			82 Street Add	dress (P.O. Box Number is Not Acceptabl	e)
PAHOKEE FL 33476				1798 East Main Street	.,,
			83		
			84 City	Debelse	85 Zip Code
				Pahokee	FL     33476
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-named con	poration submits this statement for the putition's board of directors. I hereby accept	urpose of changing its registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flor	ida Statutes.	anorta board or directors. Thereby decop-	tate appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered agen		Registered Agent signature requ		DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
TITLE	PTD 1000	☐ nttrut		TD	X change L1 Addition
NAME	THOMPSON, JOEY L.			HOMPSON, JOEY L.	
STREET ADDRESS	650 STATE MARKET ROAD			798 East Main Street	
CITY-ST-ZIP	PAHOKEE FL	DELETE		ahokee, FL. 33476	Change Addition
TITLE	VS	☐ DELETE	2.1 TITLE V		Change Addition
NAME	THOMPSON, SHERRY			HOMPSON, SHERRY	
STREET ADDRESS	650 STATE MARKET ROAD		2.3 STREET ADDRESS 1	798 East Main Street	
CITY-ST-ZIP	PAHOKEE FL	Drutte		ahokee, FL 33476	Change Addition
TITLE	1.4	☐ DELETE	3.1 TITLE		Change Madition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETT	3.4. CITY - ST - ZIP		Change Addition
TITLE		L DELETE	4.1 TOTLE		Change C Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELE <b>T</b> E	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DECETE	5.4 CITY - ST - ZIP		Change Addition
TITLE		DELETE	6.1 THTLE		Change Addition
NAME			6.2 NAME		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplicmental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**FILED** 

Apr 15 1998 8:00am

Secretary of State