

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V27327

FILED  
Mar 16, 2011  
Secretary of State

**Entity Name:** INTERLACHEN ENTERPRISES, INC.

**Current Principal Place of Business:**

C/O J. LIEF ERICKSON  
122 SOUTH PARK AVE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

C/O J. LIEF ERICKSON  
P.O.BOX 1524  
WINTER PARK, FL 32790

**New Mailing Address:**

**FEI Number:** 59-3122968

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ERICKSON, J. LIEF  
122 SOUTH PARK AVENUE  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VTD  
Name: WINN, MICHAEL  
Address: 122 SOUTH PARK AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: P  
Name: ERICKSON, J LIEF  
Address: 122 SOUTH PARK AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: VP  
Name: HOLLOWAY, LEN O  
Address: 122 SOUTH PARK AVE  
City-St-Zip: WINTER PARK, FL 32789

I hereby 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 all other like empowered.

SIGNATURE: J LIEF ERICKSON

PRES

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date