

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

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90120 037 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT #

V4613401 (5)

1. Corporation Name

SOUTHERN LAKES CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/23/1992

4. FEI Number

59-3152702

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax.

Yes No

2. Principal Place of Business

2a. Mailing Address

21 33900 Linda Lane

26 P.O. Box 895748

Suite, Apt. #, etc.  
22 LEESBURG

Suite, Apt. #, etc.

City & State  
23 FLORIDA

City & State  
28 LEESBURG, FLORIDA

Zip Country  
24 34788 25 usa

Zip Country  
29 34789-5748 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEIXNER, DAVID

81 Name Meixner, David

82 Street Address (P.O. Box Number is Not Acceptable)

33900 Linda Lane

83 Leesburg

84 City Leesburg

FL 85 Zip Code 34788

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

D  
MEIXNER, DAVID  
33900 Linda Lane  
Leesburg, FL 34788

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

PS  
MEIXNER, ELKE  
33900 Linda Lane  
Leesburg, Florida 34788

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

T  
MEIXNER, ELKE  
33900 Linda Lane  
Leesburg, Florida 34788

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

Change Addition

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 supplemental 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, with a power of attorney.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT REGISTERED AGENT

April 7, 1999

352-253-0566

Overtime Phone #

CR2E034 (11/98)