

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90337 045 ***150.00

DOCUMENT # P97000072492

1. Entity Name
 FALLS COMPANY OF LBK NORTH, INC.



Principal Place of Business Mailing Address
 PO BOX 1370 PO BOX 1370
 ANNA MARIA, FL 34216 ANNA MARIA, FL 34216

50038256

2. Principal Place of Business 3. Mailing Address



State Apt # etc State Apt # etc

04112005 Chg-P CR2E034 (10/03)

City & State City & State

4. FEI Number Applied For
 65-0789501 If Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FALLS, JOSEPH S
 8404 MARINA DR
 HOLMES BEACH, FL 34217
*1404 63rd St NW
 Bradenton, FL
 34209*

Name
 Street Address P.O. Box (if not applicable)
 City FL ZIP CODE

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. (Applicable when filed as part of the qualifications of registered agent)

SIGNATURE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P FALLS, JOSEPH S	NAME	<i>1404 63rd St NW</i>
STREET ADDRESS	8404 MARINA DR.	STREET ADDRESS	<i>Bradenton, FL 34209</i>
CITY & STATE	HOLMES BEACH, FL 34217	CITY & STATE	
NAME	VP FALLS, ARTHUR T	NAME	<i>3303 Ringwood Meadow</i>
STREET ADDRESS	3305 RINGWOOD MEADOW	STREET ADDRESS	<i>Sarasota, FL 34235</i>
CITY & STATE	SARASOTA, FL 34235	CITY & STATE	
NAME	ST FALLS, BETSY A	NAME	
STREET ADDRESS	986 CASA SOLANA	STREET ADDRESS	
CITY & STATE	WHEATON, IL 60187	CITY & STATE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	

12. I hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 19.07(3)(b), Florida Statutes. If any other person has been identified as 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 each officer or director to the corporation, if it is a newly created corporation, has read this report as required by Chapter 607, Florida Statutes, and that my name appears on Blue-Form Blue, changed or an attachment, with all necessary information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR