

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F79850

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

6755 HUNDRED ACRE DR  
PORT ST JOHN, FL 32927 US

**New Principal Place of Business:**

**Current Mailing Address:**

6755 HUNDRED ACRE DR  
PORT ST JOHN, FL 32927 US

**New Mailing Address:**

FEI Number: 59-2193129

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LACOSTE, LOIS M  
6755 HUNDRED ACRE DR  
PORT ST JOHN, FL 32927 US

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

LACOSTE, LOIS M  
6755 HUNDRED ACRE DR  
PORT ST JOHN, FL 32927 US

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: LOIS M. LACOSTE

03/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TS  
Name: LACOSTE, LOIS M  
Address: 6755 HUNDRED ACRE DR  
City-St-Zip: PORT ST JOHN, FL 32927

Title: P  
Name: LACOSTE, ROBERT  
Address: 6755 HUNDRED ACRE DR  
City-St-Zip: PORT ST JOHN, FL 32927

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: LOIS M. LACOSTE

TS

03/16/2012

Electronic Signature of Signing Officer or Director

Date