

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J85584

FILED
May 15, 2012
Secretary of State

Entity Name: THE LEATHER SHOP OF LAKE CITY, INCORPORATED

Current Principal Place of Business:

309 NO. MARION AVE
SUITE 1
LAKE CITY, FL 32055 US

New Principal Place of Business:

Current Mailing Address:

309 NO. MARION AVE
SUITE 1
LAKE CITY, FL 32055 US

New Mailing Address:

FEI Number: 59-2839078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMMERS, FRED J
309 NO. MARION ST.
STE 1
LAKE CITY, FL 32055 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: PVD
Name: LAMMERS, FRED J
Address: 309 NO. MARION AVE STE 1
City-St-Zip: LAKE CITY, FL 32055

Title: TRES
Name: LAMMERS, CLEARENCE W TRESURE
Address: 309 NO. MARION AVE
City-St-Zip: LAKE CITY, FL 32055

Title: SEC
Name: LAMMERS, KYLE W SEC.
Address: 309 NO. MARION AVE
City-St-Zip: LAKE CITY, FL 32055

Title: VP
Name: LAMMERS, KEVIN J VPRES
Address: 309 NO. MARION AVE
City-St-Zip: LAKE CITY, FL 32055

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: FRED J LAMMERS

PRS

05/15/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date