

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000068044

Entity Name: ALEX LAWLESS, INC.

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4857 MOCKINGBIRD DR.  
RIDGE MANOR, FL 33523

**New Principal Place of Business:**

**Current Mailing Address:**

4857 MOCKINGBIRD DR.  
RIDGE MANOR, FL 33523

**New Mailing Address:**

FEI Number: 32-0115988

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAWLESS, ALEX  
4857 MOCKINGBIRD DR.  
RIDGE MANOR, FL 33523 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: DP  
Name: LAWLESS, ALEX  
Address: 4857 MOCKINGBIRD DR.  
City-St-Zip: RIDGE MANOR, FL 33523

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: ALEX LAWLESS

PRES

04/25/2011

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

\_\_\_\_\_  
Date