

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008214

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** LUMON INCORPORATED

**Current Principal Place of Business:**

945 LAS NAVAS PLACE  
ST. AUGUSTINE, FL 32092 US

**New Principal Place of Business:**

**Current Mailing Address:**

945 LAS NAVAS PLACE  
ST AUGUSTINE, F 32092

**New Mailing Address:**

**FEI Number:** 06-1840165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LABIAL, GUILLERMO R  
945 LAS NAVAS PLACE  
ST. AUGUSTINE, FL 32092 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:** P  
**Name:** LABIAL, MARJORIE U  
**Address:** 945 LAS NAVAS PLACE  
**City-St-Zip:** ST..AUGUSTINE, FL 32092 US

**Title:** VP  
**Name:** URIARTE, GREGGO B  
**Address:** KM 1 RIZAL STREET  
**City-St-Zip:** SURIGAO CITY, PH 8400 PH

**Title:** T  
**Name:** LABIAL, GUILLERMO R  
**Address:** 945 LAS NAAS PLACE  
**City-St-Zip:** ST. AUGUSTINE, FL 32092 US

**Title:** S  
**Name:** MALINAO, JOJI T  
**Address:** 180 KNOLLWOOD DRIVE  
**City-St-Zip:** ALBANY, GA 31701 US

**Title:** A  
**Name:** URIARTE, MARGARINA B  
**Address:** 945 LAS NAVAS PLACE  
**City-St-Zip:** ST. AUGUSTINE, FL 32092 US

**Title:** P  
**Name:** BARRON, LOVELINA U  
**Address:** 539 NORTH WESTOVER BLVD #1422  
**City-St-Zip:** ALBANY, G 31707 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** GUILLERMO R. LABIAL

TREA

04/10/2012

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

\_\_\_\_\_  
Date