

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000030257

**Entity Name:** LSL CORPORATION

**Current Principal Place of Business:**

606 MINNEHAHA LANE  
MAITLAND, FL 32751

**FILED**  
**Apr 02, 2018**  
**Secretary of State**  
**CC5349961983**

**Current Mailing Address:**

P.O BOX 940877  
MAITLAND, FL 32794-0877 US

**FEI Number: 59-3716062**

**Certificate of Status Desired: No**

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

SCHIEFERDECKER, HOWARD A  
606 MINNEHAHA LANE  
MAITLAND, FL 32751 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name SCHIEFERDECKER, HOWARD A  
Address 606 MINNEHAHA LANE  
City-State-Zip: MAITLAND FL 32751

Title VSTD  
Name LONGSTAFF, GREGORY  
Address 940 CENTRE CIRCLE SUITE 3006  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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: HOWARD A. SCHIEFERDECKER**

**REGISTERED AGENT**

**04/02/2018**

Electronic Signature of Signing Officer/Director Detail

Date