

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000091831

**Entity Name:** LEMASTER INCORPORATED

**Current Principal Place of Business:**

10080 COBB RD  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

P.O. BOX 10358  
BROOKSVILLE, FL 34603 US

**FEI Number:** 46-3728002

**Certificate of Status Desired:** Yes

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

LEMASTER, TRACY  
10080 COBB RD  
BROOKSVILLE, FL 34601 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	P	Title	S
Name	LEMASTER, TRACY	Name	LEMASTER, REBECCA
Address	10080 COBB RD	Address	10080 COBB RD
City-State-Zip:	BROOKSVILLE FL 34601	City-State-Zip:	BROOKSVILLE FL 34601

*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:** TRACY LEMASTER

**PRESIDENT**

**01/15/2018**

Electronic Signature of Signing Officer/Director Detail

Date