

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 326498

Entity Name: LASKCO INC

FILED
Feb 16, 2012
Secretary of State

Current Principal Place of Business:

4502 OLD WINTER GARDEN RD.
SUITE L
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

4502 OLD WINTER GARDEN RD.
BOX 13
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 59-1203145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LILLY,IRA D
1409 SYMPHONY CT
ORLANDO, FL 32804 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: PD
Name: LILLY,IRA D
Address: 1409 SYMPHONY CT
City-St-Zip: ORLANDO, FL 32804

Title: CEO
Name: LILLY,ALAN F
Address: 618 WOODWARD ST
City-St-Zip: ORLANDO, FL 32803

Title: S
Name: LILLY,ALLEGRA A
Address: 1409 SYMPHONY CT
City-St-Zip: ORLANDO, FL 32804

Title: D
Name: LILLY,ALLEGRA A
Address: 1409 SYMPHONY CT
City-St-Zip: ORLANDO, FL 32804

Title: D
Name: LILLY, LARRY D.
Address: P.O. BOX 80
City-St-Zip: COOL RIDGE, WV 25825

Title: DVP
Name: SAVINO, BARBARA
Address: 1530 JILL JENNE LANE
City-St-Zip: LONGWOOD, FL 32779

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: IRA D. LILLY

RA

02/16/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date