

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 544462

FILED  
Jun 14, 2012  
Secretary of State

**Entity Name:** LEE LURES OF FLORIDA, INC.

**Current Principal Place of Business:**

1004 HWY 92 W.  
SEFFNER, FL 33584

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 65  
VALRICO, FL 33595

**New Mailing Address:**

**FEI Number:** 59-1762167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THUROW, ALBERT J  
1004 WEST U.S. HWY 92  
SEFFNER, FL 33584 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: V  
Name: THUROW, ALBERT J III  
Address: 4605 SUMMER WINDS CT  
City-St-Zip: PLANT CITY, FL 33566

Title: ST  
Name: THUROW, GLENDA D  
Address: 2103 WHITLOCK PL  
City-St-Zip: DOVER, FL 33527

Title: P  
Name: THUROW, ALBERT J  
Address: 2103 WHITLOCK PL  
City-St-Zip: DOVER, FL 33527

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: ALBERT J. THUROW

PRES

06/14/2012

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

\_\_\_\_\_ Date