## 2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 561846** 

Entity Name: LAKELAND SLEEP CENTER, INC.

**FILED** Mar 22, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3020 REYNOLDS RD. 3020 REYNOLDS RD. #7

#6-7

LAKELAND, FL 33803 US LAKELAND, FL 33803 US

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 1768

EATON PARK, FL 33840 US

FEI Number: 59-2088562 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CASSEL, KEN CASSEL, CINDY 3020 REYNOLDS RD. 3020 REÝNOLDS RD. #6-7

LAKELAND, FL 33803 US LAKELAND, FL 33803 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: CINDY CASSEL 03/22/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

**PRES** Title:

CASSEL, CINDY Name: 3020 REYNOLDS RD. Address: City-St-Zip: LAKELAND, FL 33803 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CINDY CASSEL **PRES** 03/22/2012