2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 580411

Address:

City-St-Zip:

5245 N UNIVERSITY DR

LAUDERHILL, FL 33351

LAKEO EL ECTRONICO INO

FILED Mar 23, 2009 Secretary of State

Entity Name: LAKES ELECTRONICS, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5245 N. UNIVERSITY DR. LAUDERHILL, FL 333515005				5245 N. UNIVERSITY DRIVE LAUDERHILL, FL 333515005	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
5245 N. UNIVERSITY DR. LAUDERHILL, FL 333515005				5245 N. UNIVERSITY DRIVE LAUDERHILL, FL 333515005	
FEI Number:	: 59-1837173	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
5245 N. UN	RSON, FRANC NIVERSITY DF IILL, FL 33351	₹.	5245 N. UNIVERSITY	MACPHERSON, FRANCES O. 5245 N. UNIVERSITY DRIVE LAUDERHILL, FL 33351 US	
	named entity s e of Florida.	submits this statement for the p	purpose of changing its register	ed office or registered agent, or both,	
SIGNATURE:				03/23/2009	
	Electror	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () MACPHERSON 5245 N.UNIVER LAUDERHILL, I	RSITY DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () MACPHERSON 5245 N.UNIVER LAUDERHILL, I	RSITY DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () MACPHERSON	Delete , ANDREW,, E	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANDREW E. MACPHERSON VΡ 03/23/2009