

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 688096

FILED  
Jan 13, 2012  
Secretary of State

Entity Name: FAMLEE INVESTMENT COMPANY

**Current Principal Place of Business:**

6509 HAZELTINE NATIONAL DR  
SUITE 6  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

6509 HAZELTINE NATIONAL DR  
SUITE 6  
ORLANDO, FL 32822

**New Mailing Address:**

FEI Number: 59-2041290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEE, RICHARD T  
6509 HAZELTINE NATIONAL DR  
SUITE 6  
ORLANDO, FL 32822 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: LEE, RICHARD T  
Address: 6509 HAZELTINE NAT'L DR STE 6  
City-St-Zip: ORLANDO, FL 32822

Title: V  
Name: LEE, THOMAS G II  
Address: 6509 HAZELTINE NAT'L DR STE 6  
City-St-Zip: ORLANDO, FL 32822

Title: VDT  
Name: LEE, KATHLEEN S  
Address: 6509 HAZELTINE NAT'L DR STE 6  
City-St-Zip: ORLANDO, FL 32822

Title: VD  
Name: BARROW, LORRAYNE L  
Address: 6509 HAZELTINE NAT'L DR STE 6  
City-St-Zip: ORLANDO, FL 32822

Title: V  
Name: JOHNSON, MICHELLE L  
Address: 6509 HAZELTINE NAT'L DR STE 6  
City-St-Zip: ORLANDO, FL 32822

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: RICHARD T. LEE

PD

01/13/2012

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

\_\_\_\_\_  
Date