

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90380 006 ***158.75

DOCUMENT # F01000005081 1. Entity Name THE LORD AND LASKER COMPANY					
Principal Place of Business 114 N TENNESSEE AVE SUITE 201 LAKELAND, FL 33801			Mailing Address P.O. BOX 8757 LAKELAND, FL 33806		
2. Principal Place of Business 109 S. Edison Ave.		3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01072004 Chg-P CR2E034 (10/03)	
City & State Tampa, FL 33606		City & State		4. FEI Number 59-3711647	
Zip 33606		Country Hillsborough		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
-- 6. Name and Address of Current Registered Agent -- YANGER, WILLIAM L 201 N. FRANKLIN ST. TAMPA, FL 33602				-- 7. Name and Address of New Registered Agent -- Name Christopher C. Harwell Street Address (P.O. Box Number is Not Acceptable) 109 S. Edison Avenue City Tampa, FL Zip Code 33606	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Christopher C. Harwell  4/27/2004 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing... Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS...			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HARWELL, CHRISTOPHER C 114 N TENNESSEE AVE SUITE 201 LAKELAND, FL 33801	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Christopher C. Harwell 109 S. Edison Ave. Tampa, FL 33606	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other information empowered.					
SIGNATURE: 			Christopher C. Harwell 4/27/2004 813/287-0028 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		