2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003700

Entity Name: LAUREN'S LIGHT, INC.

Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3 GROVE ISLE DR. SUITE 503 COCONUT GROVE, FL 33133 **New Mailing Address: Current Mailing Address:** 3 GROVE ISLE DR. SUITE 503 COCONUT GROVE, FL 33133 FEI Number: 38-3662090 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: FEINSWOG, BEN FEINSWOG, BEN 3 GROVE ISLE DR STE 503 3 GROVE ISLE DR STE 505 US COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133 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: 04/23/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MILLIN, ANTHONY Name: Name: 71 HOWARD PARK DRIVE Address: Address: City-St-Zip: TENAFLY, NJ 07670 City-St-Zip: Title: CCEO () Delete Title: CCEO (X) Change () Addition Name: FEINSWOG, BEN Name: FEINSWOG, BEN Address: 3 GROVE ISLE DR., STE, 503 Address: 3 GROVE ISLE DR., STE, 505 City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133 Title: DS () Delete Title: DS (X) Change () Addition FEINSWOG, MALVINA FEINSWOG, MALVINA Name: Name: 3 GROVE ISLE DR., STE. 503 3 GROVE ISLE DR., STE. 505 Address: Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133 Title: () Delete Title: () Change () Addition Name: LURIE. ROBERT Name: 309 WILLOW BROOK DRIVE Address: Address: City-St-Zip: WAYLAND, MA 01778 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEN FEINSWOG, CCEO **CCEO** 04/23/2009