

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002803

FILED  
Jan 04, 2007  
Secretary of State

**Entity Name:** LASHLEY, COHEN AND ASSOCIATES, INC.

**Current Principal Place of Business:**

1800 CEDARS ROAD, SUITE 102  
LAWRENCEVILLE, GA 30045 US

**New Principal Place of Business:**

**Current Mailing Address:**

1800 CEDARS ROAD, SUITE 102  
LAWRENCEVILLE, GA 30045 US

**New Mailing Address:**

FEI Number: 58-1882506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPITAL CONNECTION, INC.  
417 E. VIRGINIA ST.  
STE. 1  
TALLAHASSEE, FL 323011283 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LASHLEY, STEVEN C  
Address: 950 BRAMLETT SHOALS RD  
City-St-Zip: LAWRENCEVILLE, GA 30045 US

Title: S ( ) Delete  
Name: LASHLEY, JEAN S  
Address: 808 NORTH 17TH STREET  
City-St-Zip: LANETT, AL 36863

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LASHLEY, STEVEN C  
Address: 1800 CEDARS ROAD, SUITE 102  
City-St-Zip: LAWRENCEVILLE, GA 30045 US

Title: S (X) Change ( ) Addition  
Name: PAUL, JOHN W  
Address: 1800 CEDARS ROAD, SUITE 102  
City-St-Zip: LAWRENCEVILLE, GA 30045 US

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: STEVEN C LASHLEY

P

01/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date