

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F83612

Entity Name: LES-QUE ONE, INC.

FILED  
Mar 26, 2012  
Secretary of State

**Current Principal Place of Business:**

11918 SW 37TH TRAIL  
LAKE BUTLER, FL 32054

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 22  
WORTHINGTON SPRINGS, FL 32697

**New Mailing Address:**

FEI Number: 59-2591020

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIMES, JOHN D  
11918 SW 37TH TRAIL  
LAKE BUTLER, FL 32054 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: STD  
Name: RIMES, LESSIE M  
Address: POB 22  
City-St-Zip: WORTHINGTON SPRINGS, FL 32697

Title: PCM  
Name: RIMES, JOHN D JR  
Address: POB 22  
City-St-Zip: WORTHINGTON SPRINGS, FL 32697

Title: D  
Name: RIMES III, JOHN P  
Address: P.O. BOX 22  
City-St-Zip: WORTHINGTON SPRINGS, FL 32697

Title: D  
Name: RIMES, JEFFREY D  
Address: P.O. BOX 22  
City-St-Zip: WORTHINGTON SPRINGS, FL 32697

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: JOHN D. RIMES JR.

PCM

03/26/2012

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

\_\_\_\_\_  
Date