


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F94000004444	
1. Entity Name LAT PURSER FLORIDA, INC.	

FILED
Aug 04, 2008 08:00 AM
Secretary of State

Principal Place of Business 6320 ST. AUGUSTINE ROAD SUITE 7 JACKSONVILLE, FL 32217	Mailing Address 4530 PARK RD. SUITE 300 CHARLOTTE, NC 28209
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07172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3266098	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, STE 105 TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PURSER, LAT W III 4530 PARK RD #300 CHARLOTTE, NC 28209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD HENDERSON, GENEVA 6320 ST. AUGUSTINE RD, STE. 7 JACKSONVILLE, FL 32217
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEATHERWOOD, DANIEL L 4530 PARK RD #300 CHARLOTTE, NC 28209
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08/04/08-80004-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: Daniel L Leatherwood 7-21-08 704-519-4200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #