

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000520

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: LS3P ASSOCIATES LTD. CORPORATION

**Current Principal Place of Business:**

205 1/2 KING STREET  
CHARLESTON, SC 29401

**New Principal Place of Business:**

**Current Mailing Address:**

205 1/2 KING STREET  
ATTN: B. KUNREUTHER  
CHARLESTON, SC 29401

**New Mailing Address:**

FEI Number: 57-0475651      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: COB ( ) Delete  
Name: LUCAS, FRANK E FAIA  
Address: 205 1/2 KING ST.  
City-St-Zip: CHARLESTON, SC 29401

Title: PCEO ( ) Delete  
Name: THOMPSON, PENNY E FAIA  
Address: 205 1/2 KING ST.  
City-St-Zip: CHARLESTON, SC 29401

Title: VP ( ) Delete  
Name: HUND, THOMAS J AIA  
Address: 205 1/2 KING STREET  
City-St-Zip: CHARLESTON, SC 29401

Title: CSO ( ) Delete  
Name: BONEY, PAUL D FAIA  
Address: 2528 INDEPENDENCE BLVD; STE 200  
City-St-Zip: WILMINGTON, NC 28412

Title: VCHM ( ) Delete  
Name: TRIBBLE, MICHAEL FAIA  
Address: 227 WEST TRADE STREET; STE 700  
City-St-Zip: CHARLOTTE, NC 28202

Title: EVPS ( ) Delete  
Name: BAKER, SUSAN C AIA  
Address: 227 WEST TRADE ST., STE. 700  
City-St-Zip: CHARLOTTE, NC 28282

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CSO (X) Change ( ) Addition  
Name: BONEY, PAUL D FAIA  
Address: 434 FAYETTEVILLE ST; SUITE 1700  
City-St-Zip: RALEIGH, NC 27601

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMPSON E. PENNEY

Electronic Signature of Signing Officer or Director

PCEO

03/23/2009

\_\_\_\_\_ Date