

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H42556

Entity Name: LAUREL SERVICE CORP.

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

150 OXFORD RD, SUITE 140  
FERN PARK, FL 327307789

**New Principal Place of Business:**

**Current Mailing Address:**

150 OXFORD RD, SUITE 140  
FERN PARK, FL 327307789

**New Mailing Address:**

FEI Number: 59-2530899

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBINSON IV, JOSEPH D.  
150 OXFORD ROAD  
FERN PARK, FL 32730 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: PD  
Name: ROBINSON, JOSEPH D., IV  
Address: 150 OXFORD ROAD  
City-St-Zip: FERN PARK, FL

Title: DST  
Name: RIDGWAY, JANET  
Address: 705 YOUNGSTOWN PKWY #359  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: ASD  
Name: ROBINSON, JOSEPH D V  
Address: 150 OXFORD ROAD, SUITE 140  
City-St-Zip: FERN PARK, FL 32730

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: JANET L. RIDGWAY

DST

04/19/2011

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

\_\_\_\_\_  
Date