

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J70639

FILED  
Jan 24, 2012  
Secretary of State

**Entity Name:** LECANTO INVESTMENTS, INC.

**Current Principal Place of Business:**

9400 RIVER CROSSING BLVD., SUITE 104  
NEW PORT RICHEY, FL 34655 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2108  
ELFERS, FL 34680 US

**New Mailing Address:**

**FEI Number:** 59-2802998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUDSON, JOHN E SR.  
9400 RIVER CROSSING BLVD., SUITE 104  
NEW PORT RICHEY, FL 34655 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: HUDSON, JOHN E.  
Address: 9400 RIVER CROSSING BLVD., SUITE 104  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP  
Name: MINIERI, CARL  
Address: 36370 HWY. 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684 US

Title: ST  
Name: SILVA, SUSAN  
Address: 9400 RIVER CROSSING BLVD., SUITE 104  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP  
Name: BRASHER, C. JOHN  
Address: 8020 OLD SR 54  
City-St-Zip: NEW PORT RICHEY, FL 34653

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 E. HUDSON

P

01/24/2012

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

\_\_\_\_\_  
Date