2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J80126

Entity Name: LAOP, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2523 SADDLEWOOD LANE 1537 HILLCREST AVENUE PALM HARBOR, FL 34685 WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

2523 SADDLEWOOD LANE 1537 HILLCREST AVENUE PALM HARBOR, FL 34685 WINTER PARK, FL 32789

FEI Number: 59-2817995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ESTES, PATRICIA

1537 HILLCREST AVE.

WINTER PARK, FL 32789 US

GULECAS, JAMES F
1968 BAYSHORE BLVD
DUNEDIN, FL 34698 US

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: JAMES F GULECAS 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DPST (X) Change () Addition Name: PRITCHETT, O.R., Name: ESTES, PATRICIA L Address: 2523 SADDLEWOOD LANE Address: 1537 HILLCREST AVENUE

2523 SADDLEWOOD LANE
PALM HARBOR, FL 34685

Address: 1537 HILLCREST AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: ST () Delete Title: D (X) Change () Addition Name: PRITCHETT, LAVERNE, Name: PRITCHETT, KEITH R

Address: 2523 SADDLEWOOD LANE Address: 6363 GRIFFIN ROAD

City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: BROOKSVILLE, FL 34601

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 KARCHER, GAIL

 Address:
 Address:
 2666 SOUTH DRIVE

 City-St-Zip:
 City-St-Zip:
 CLEARWATER, FL 33759

Title: () Delete Title: D () Change (X) Addition

Name: Name: PRITCHETT, SUSAN Address: Address: 100 WALBURG STREET

City-St-Zip: City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: PATRICIA L ESTES P 04/30/2008