

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000013

FILED  
Jan 14, 2012  
Secretary of State

Entity Name: LAUNCHERS, INC.

**Current Principal Place of Business:**

C/O LAVIGNE, COTON AND ASSOCIATES  
7087 GRAND NATIONAL DR, SUITE 100  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LAVIGNE, COTON AND ASSOCIATES  
7087 GRAND NATIONAL DR, SUITE 100  
ORLANDO, FL 32819

**New Mailing Address:**

FEI Number: 27-4514032

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAVIGNE, JAMES R ESQ  
7087 GRAND NATIONAL DR, SUITE 100  
ORLANDO, FL 32819 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: P  
Name: SMITH, CHRIS  
Address: 828 SHELL LANE  
City-St-Zip: LONGWOOD, FL 32750

Title: D  
Name: NOLAN, JOHN  
Address: 115 FOREST POINT LANE  
City-St-Zip: LONGWOOD, FL 32779

Title: S  
Name: MANNING, GINA  
Address: 1001 KRISTEN LANE  
City-St-Zip: ORANGE CITY, FL 32763

Title: T  
Name: LOFGREN, PETER  
Address: 119 TROTWOOD BLVD  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D  
Name: BARNHILL, SCOTT  
Address: 1182 GOLF STAR DR  
City-St-Zip: WINTER SPRINGS, FL 32708

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GINA MANNING

S

01/14/2012

Electronic Signature of Signing Officer or Director

Date