

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008304

FILED  
May 02, 2012  
Secretary of State

**Entity Name:** LADY FALCONS INC.

**Current Principal Place of Business:**

3308 LIME TREE DRIVE  
EDGEWATER, FL 32141

**New Principal Place of Business:**

**Current Mailing Address:**

3308 LIME TREE DRIVE  
EDGEWATER, FL 32141

**New Mailing Address:**

**FEI Number:** 45-3155422

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYNOR, SHERI L  
539 MILL RUN DRIVE  
NEW SMYRNA BEACH, FL 32168 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, ALISSA  
**Address:** 1200 W INTERNATIONAL SPDWY BLVD  
**City-St-Zip:** DAYTONA, FL 32114

**Title:** D  
**Name:** TAYNOR, SHERI  
**Address:** 539 MILL RUN DRIVE  
**City-St-Zip:** NEW SMYRNA BEACH, FL 32168

**Title:** T  
**Name:** GAYSON, DEBORAH  
**Address:** 3524 RED PONTIAC DRIVE  
**City-St-Zip:** PORT ORANGE, FL 32129

**Title:** D  
**Name:** DOUGAL, SHELLY  
**Address:** 5903 SPRUCE CREEK ROAD  
**City-St-Zip:** PORT ORANGE, FL 32127

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:** SHERI TAYNOR

D

05/02/2012

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

\_\_\_\_\_  
Date