

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90038 029 ****61.25

DOCUMENT # N36910

1. Entity Name

LSN, INC.



Principal Place of Business

P O BOX 221
YOUNGSTOWN FL 32466-7221

Mailing Address

P O BOX 221
YOUNGSTOWN FL 32466-7221



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2987840

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERNHARDT, BILL C
2916 EAST AVON ROAD
PANAMA CITY FL 32405

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature is required when reconstituting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME BERNHARDT, BILL C ☐ Delete
STREET ADDRESS 2916 EAST AVON ROAD
CITY- ST- ZIP PANAMA CITY FL 32405

TITLE SD ☐ Change ☒ Addition
NAME Gail Faircloth
STREET ADDRESS 1955 Greensboro Hwy
CITY- ST- ZIP Quincy, FL 32351

TITLE SD ☒ Delete
NAME BENTLEY, JONI
STREET ADDRESS 132 MICHAEL WAY
CITY- ST- ZIP EASTPOINT FL 32328

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D ☒ Delete
NAME STRICKLIN, BILL
STREET ADDRESS 925 LINDEN AVE
CITY- ST- ZIP NICEVILLE FL 32578

TITLE D ☐ Change ☒ Addition
NAME Tim Aiken
STREET ADDRESS 195 1st Street
CITY- ST- ZIP Chipley FL 32428

TITLE VD ☐ Delete
NAME BENTLEY, RICHARD
STREET ADDRESS 132 MICHAEL WAY
CITY- ST- ZIP EASTPOINT FL 32328

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE TD ☒ Delete
NAME GATEWOOD, PAULA
STREET ADDRESS 5719 KEVIN CIRCLE
CITY- ST- ZIP PANAMA CITY FL 32404

TITLE TD ☐ Change ☒ Addition
NAME Cathy Bernhard
STREET ADDRESS 2916 E. Avon Road
CITY- ST- ZIP PANAMA City FL 32405

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: BILL C BERNHARDT

27 JAN 08 850-769-6087