2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000096219

Entity Name: LAWSON COMPANY, INC.

FILED Aug 03, 2005 Secretary of State

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

18302 HIGHWOODS PRESERVE PWY #105 13367 N. 56TH STREET TAMPA, FL 33647 TAMPA, FL 33617

Current Mailing Address: New Mailing Address:

1611 W PLATT ST KOEHLER & COMPANY PA
TAMPA, FL 33606 502 NORTH ARMENIA AVENUE
TAMPA, FL 33609

FEI Number: 59-3683403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KOEHLER, KEITH W CPA

1611 W PLATT ST

TAMPA, FL 33606 US

KOEHLER, KEITH W CPA

502 NORTH ARMENIA AVENUE

TAMPA, FL 33609 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: KEITH W KOEHLER 08/03/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: LAWSON, LARRY F II
Address: 18302 HIGHWOODS PRESERVE PKWY SUITE 105
Name: LAWSON, LARRY F II
Address: 13367 N. 56TH STREET

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33617

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

 Name:
 Name:
 VARGO, MICHAEL S

 Address:
 Address:
 13367 N. 56TH STREET

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 33617

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEITH W KOEHLER CPA 08/03/2005