2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # P0100064983 1. Entity Name FREDERICK LAURIN SERVICES, INC.						04-28-2008 9	00356 032 **	**158.	75	
Principal Place of Business Mailing Address				. ;	. 300					
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2410 ARBORWOOD DR 2410 ARBORWOOD I VAI RICO, FL 3359 VALRICO, FL 3359 VALR				•						
VALRICO, FL 3359 6 VALRICO, FL 3359 6										
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2. Principal Place of Business - No P.O. Box # 3. Mailing Address										
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Suite, Apt.	# etc	Suite, Apt. #, etc.		l .						
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City & State		City & State			4. FEI Numbe	ľ		IGA	olied For	
City o claic		Sity & Size) 			Applicable		
Zip . Country		Zip Cou		trv	<u></u>	<u> </u>	¢ρ	,	- ' '	
2.10	. Country Zip		556.	5. Certificate of Status Desired				\$8.75 Additional Fee Required		
	6 Name and Address of Current	Registered Agent			7 Name and	Address of New R		 _		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name								<u> </u>	_	
PROCISE.	MARIE C									
	ORWOOD DR			Street Address (P.O. Box Number is Not Acceptable)						
	FL:33596									
WALKINGO, TE GOODS										
	•			City		-		Zip Code		
	\$1. *-			City			FL ²	tib Code	' I	
8. The above nagged entity submits this statement for the surpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept										
the obligat	ions of regions and agent.	/)	•	ū	•			_ /	·	
	Make 1 (1 B	Lange				φ	-24/1	0		
SIGNATURE THURLE CONDUME										
Signature Ayed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees										
OCCUPATION AND DISCOURAGE					APPLITIONS	CHANGED TO OFF	ICEBS AND DID		10144	
10.	OFFICERS AND DIRECTORS 11.				ADDITIONS/	CHANGES TO OFF				
TITLE			TITL					Change	Addition	
NAME	PROCISE, MARIE C		NAM	- 1						
STREET ADDRESS				E1 ADDRESS					i	
CITY-ST-ZIP			CITY	-ST-ZIP						
TIFLE	VP	☐ Delete	TITL					Change	Addition	
NAME	PROCISE, FRED L		NAM	E					ļ	
STREET ADDRESS	2410 ARBORWOOD DRIVE		STRE	ET ADDRESS						
CITY-ST-ZIP	VALRICO, FL 3359		CITY	-ST-ZIP						
TITLE		☐ Delete	TITLE					Change	☐ Addition	
NAME			NAM				_	3		
STREET ADDRESS.				ET AUDRESS				. —		
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TITLE		☐ Delete	TITL					Change	Addition	
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NAME			NAM	E					Ì	
STREET ADDRESS			STRE	ET ADDRESS						
CITY-ST-ZIP			CITY	-ST-ZIP					ļ	
12. I hereby o	certify that the information supplied with	this filing does not qualify to	r the ex	emptions contained	in Chapter 119	, Florida Statutes. I	further certify th	at the in	formation	
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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an artachment with an address, with all other like empowered.										