

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000080107

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** THE ART STUDIO OF LAKE MARY, INC.

**Current Principal Place of Business:**

241 NORTH COUNTRY CLUB ROAD  
1021  
LAKE MARY, FL 32746 US

**New Principal Place of Business:**

**Current Mailing Address:**

350 BIRCHWOOD CT  
LAKE MARY, FL 327465928 US

**New Mailing Address:**

**FEI Number:** 59-3738749

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAGLIAVORE, STELLA S PRES  
350 BIRCHWOOD CT  
LAKE MARY, FL 327465928 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: PRES  
Name: TAGLIAVORE, STELLA S PRES  
Address: 350 BIRCHWOOD CT  
City-St-Zip: LAKE MARY, FL 32746

Title: CFO  
Name: TAGLIAVORE, SAM M CFO  
Address: 350 BIRCHWOOD COURT  
City-St-Zip: LAKE MARY, FL 32746 US

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

SIGNATURE: SAM TAGLIAVORE

CFO

02/16/2011

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

\_\_\_\_\_  
Date