


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 14, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000004197  
 1. Entity Name  
 LOL, INC.



Principal Place of Business      Mailing Address  
 5030 DELEON OAKS CT      5030 DELEON OAKS CT  
 DELEON SPRINGS, FL 32130      DELEON SPRINGS, FL 32130

**DO NOT WRITE IN THIS SPACE**



01102005    No Chg-P    CR2E034 (10/03)

4. FEI Number 59-3764273	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 LAND, GEORGE B JR  
 5030 DELEON OAKS CT  
 DELEON SPRINGS, FL 32130

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature based on printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when re-appointing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD LAND, GEORGE B JR 5030 DELEON OAKS CT DELEON SPRINGS, FL 32130
TITLE NAME STREET ADDRESS CITY ST ZIP	VD O'BRIEN, RONALD 620 JOHNSON LAKE RD DELEON SPRINGS, FL 32130
TITLE NAME STREET ADDRESS CITY ST ZIP	STD LASSITER, DONALD R 1620 SALVADORE ST DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY ST ZIP	
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TITLE NAME STREET ADDRESS CITY ST ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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 information.

SIGNATURE:  **GEORGE B. LAND JR.**      1-15-05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date: **386-985-0056**