


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2008 8:00 am**  
**Secretary of State**

05-14-2008 90012 032 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                              |                                                                                                                                                                                                                     |                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P03000137346</b><br>1. Entity Name<br><b>LSCRR, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                              |                                                                                                                                    |                                                                                                                                             |
| Principal Place of Business<br><b>2031 PECAN COURT<br/>TALLAHASSEE, FL 32303</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                              | Mailing Address<br><b>2031 PECAN COURT<br/>TALLAHASSEE, FL 32303</b>                                                                                                                                                |                                                                                                                                             |
| 2. Principal Place of Business - No P.O. Box #<br><b>3124 Tipperary Drive</b><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                              | 3. Mailing Address<br><b>3124 Tipperary Drive</b><br>Suite, Apt. #, etc.                                                                                                                                            |                                                                                                                                             |
| City & State<br><b>Tallahassee, FL</b><br>Zip<br><b>32309</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                              | City & State<br><b>Tallahassee FL</b><br>Zip<br><b>32309</b>                                                                                                                                                        |                                                                                                                                             |
| 4. FEI Number<br><b>41-2116094</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                              | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                              |                                                                                                                                             |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                              | <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                               |                                                                                                                                             |
| 6. Name and Address of Current Registered Agent<br><br><b>SAMANIE, LAWRENCE L JR<br/>2031 PECAN COURT<br/>TALLAHASSEE, FL 32303</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><b>3124 Tipperary Drive</b><br>City <b>Tallahassee</b> <b>FL</b> Zip Code <b>32309</b>                 |                                                                                                                                             |
| 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                              |                                                                                                                                                                                                                     |                                                                                                                                             |
| <b>FILE NOW!!! FEE IS \$150.00<br/>Due by September 12, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                              | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b><br>In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |                                                                                                                                             |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                              | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                                                                        |                                                                                                                                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | P<br><b>SAMANIE, LAWRENCE L</b><br><b>2031 PECAN COURT</b><br><b>TALLAHASSEE, FL 32303</b> <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>3124 Tipperary Drive</b><br><b>Tallahassee, FL 32309</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | V<br><b>WEEKS-SAMANIE, ANGELA</b><br><b>2031 PECAN COURT</b><br><b>TALLAHASSEE, FL 32303</b> <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>3124 Tipperary Drive</b><br><b>Tallahassee, FL 32309</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                           |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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 empowered. |                                                                                                                              |                                                                                                                                                                                                                     |                                                                                                                                             |
| <b>SIGNATURE:</b> <u>Angela Weeks Samanie</u> <b>Angela Weeks-Samanie</b> <b>5/12/08</b> <b>(850) 9334429</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                              |                                                                                                                                                                                                                     |                                                                                                                                             |