

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062017

FILED
Apr 23, 2007
Secretary of State

Entity Name: ST. LAWRENCE ENTERPRISES, INC.

Current Principal Place of Business:

2117 NW 42ND PL
CAPE CORAL, FL 339933448 US

New Principal Place of Business:

Current Mailing Address:

2117 NW 42ND PL
CAPE CORAL, FL 339933448 US

New Mailing Address:

FEI Number: 20-1005612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMEY, PAUL
2117 NW 42ND PL
CAPE CORAL, FL 33993 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPTS () Delete
Name: SMEY, PAUL
Address: 2117 NW 42ND PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: D () Delete
Name: VILARDI, SUSAN
Address: 3143 TRINITY STREET
City-St-Zip: OCEANSIDE, NY 11572

Title: D () Delete
Name: VILARDI, EDWARD V
Address: 3143 TRINITY STREET
City-St-Zip: OCEANSIDE, NY 11572

Title: D () Delete
Name: RADECKE, BILLIE JO
Address: 3504 57TH CIR WEST
City-St-Zip: BRADENTON, FL 34210

Title: DVP () Delete
Name: BALLIN, VICKIE
Address: 2130 SUN TREE DRIVE
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: BALLIN, ANDRZEJ
Address: 2130 SUN TREE DRIVE
City-St-Zip: CLEARWATER, FL 33763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: PAUL SMEY

P

04/23/2007

Electronic Signature of Signing Officer or Director

Date