2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2008 08:00 AN Secretary of State DOCUMENT # P05000015761 LAKESHORE MARKETING INC. Principal Place of Business Mailing Address 7358 BISHOP RD. 7358 BISHOP RD POLAND, OH 44514 POLAND, OH 44514 04212008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 14-1921687 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRIAN PRZYSTUP AND ASSOCIATES LLC DO NOT WRITE 1881 WASHINGTON AVE 12-E M. BEACH, FL 33139 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 U00000939940 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 05/28/08-80047-012 150.00 OFFICERS AND DIRECTORS 10. PD TITLE HOPPS, ALAN C NAME 1473 N.W. 105TH AVE. STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33322 PD TITLE HOPPS, ALAN C 1473 NW 105TH AVE STREET ADDRESS PLANTATION, FL 33322 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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.

SIGNATURE:

CITY-ST-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED