

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000125156

Entity Name: LUCKYROSE FILMS, INC.

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

7300 SANDLAKE COMMONS BLVD STE 115  
ORLANDO, FL 32819

## **New Principal Place of Business:**

7300 SANDLAKE COMMONS BLVD  
SUITE 115  
ORLANDO, FL 32819

## **Current Mailing Address:**

7300 SANDLAKE COMMONS BLVD STE 115  
ORLANDO, FL 32819

## **New Mailing Address:**

7300 SANDLAKE COMMONS BLVD  
SUITE 115  
ORLANDO, FL 32819

FEI Number: 20-3532968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CFRA, LLC  
4221 W. BOY SCOUT BLVD #1000  
TAMPA, FL 33607 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: DR  
Name: MEISENHEIMER, JOHN L DR  
Address: 7300 SANDLAKE COMMONS BLVD STE 115  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: ROSE, JERRY  
Address: 7300 SANDLAKE COMMONS BLVD STE 115  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: ROSE, JENNIFER  
Address: 7300 SANDLAKE COMMONS BLVD STE 115  
City-St-Zip: ORLANDO, FL 32819

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: JOHN L. MEISENHEIMER MD

OWNE

02/22/2011

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

\_\_\_\_\_  
Date