## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000022826

Entity Name: LSK MOBILE HOMES, INC.

**FILED** Mar 11, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

13915 83RD PLACE NORTH 1110 S. MISSOURI AVE 207

SEMINOLE, FL 33776

CLEARWATER, FL 33756

**Current Mailing Address: New Mailing Address:** 

13915 83RD PLACE NORTH 1110 S. MISSOURI AVE SEMINOLE, FL 33776

CLEARWATER, FL 33756

FEI Number: 14-1949768 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLOWERS, LAURA FLOWERS, LAURA 13915 83RD PLACE NORTH 1110 S MISSOURI AVE SEMINOLE, FL 33776 207

CLEARWATER, FL 33756 US

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: 03/11/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

FLOWERS, LAURA FLOWERS, LAURA Name: Name: 13915 83RD PLACE NORTH Address: 1110 S. MISSOURI AVE #207 Address: City-St-Zip: SEMINOLE, FL 33776 City-St-Zip: CLEARWATER, FL 33756

I hereby certify that the information supplied with this filing does not qualify 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: LAURA FLOWERS 03/11/2008 D