

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000015913

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: LMSSS, INCORPORATED

## Current Principal Place of Business:

40 BARKLEY CIRCLE, SUITE 3  
FT. MYERS, FL 33907

## New Principal Place of Business:

2204 BREVARD AVENUE  
FT. MYERS, FL 33901

## Current Mailing Address:

40 BARKLEY CIRCLE, SUITE 3  
FT. MYERS, FL 33907

## New Mailing Address:

2204 BREVARD AVENUE  
FT. MYERS, FL 33901

FEI Number: 77-0716582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, STACEY  
40 BARKLEY CIRCLE, SUITE 3  
FT. MYERS, FL 33907 US

## Name and Address of New Registered Agent:

RAMSEY, GIULIA  
2204 BREVARD AVE  
FT. MYERS, FL 33901 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: GIULIA RAMSEY

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BROWN, STACEY  
Address: 40 BARKLEY CIRCLE, SUITE 3  
City-St-Zip: FT. MYERS, FL 33907

Title: VP ( ) Delete  
Name: BROWN, STUART  
Address: 40 BARKLEY CIRCLE, SUITE 3  
City-St-Zip: FT. MYERS, FL 33907

Title: ST ( ) Delete  
Name: BROWN, STACEY  
Address: 40 BARKLEY CIRCLE, SUITE 3  
City-St-Zip: FT. MYERS, FL 33907

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BROWN, STACEY  
Address: 2204 BREVARD AVE  
City-St-Zip: FT. MYERS, FL 33901

Title: VP (X) Change ( ) Addition  
Name: BROWN, STUART  
Address: 2204 BREVARD AVE  
City-St-Zip: FT. MYERS, FL 33901

Title: ST (X) Change ( ) Addition  
Name: BROWN, STACEY  
Address: 2204 BREVARD AVE  
City-St-Zip: FT. MYERS, FL 33901

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: STACEY BROWN

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date