2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# P08000027647

Entity Name: LUCKY 7 ARCADE/CASINO, INC.

Current Principal Place of Business:

2605 TAMIAMI TRAIL
SUITE 6
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

2605 TAMIAMI TRAIL
SUITE 6
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 26-2225601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONWAY, WILLIAM D
2605 TAMIAMI TRAIL
SUITE 6
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

VINEYARD, LYNN T
2605 TAMIAMI TRAIL
SUITE 6
PORT CHARLOTTE, FL 33952 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: LYNN VINEYARD 04/30/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: AUDIA, SANTO
Address: 3500 ALTA VISTA
City-St-Zip: STERLING HEIGHTS, MI 48312

Title: D, P
Name: VINEYARD, LYNN T
Address: 38415 RIVERSIDE DRIVE
City-St-Zip: CLINTON TOWNSHIP, MI 48036

Title: D,S
Name: GAUDIO, DONNA
Address: 40329 LA GRANGE
City-St-Zip: STERLING HEIGHS, MI 48313

Title: D
Name: BAGIARDI, JULIO
Address: 1533 FORAND CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D
Name: AMORE, PHIL
Address: 38540 KINGSBURY
City-St-Zip: LIVONIA, MI 48154

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: LYNN T. VINEYARD P 04/30/2012
Electronic Signature of Signing Officer or Director Date