## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000043711

Entity Name: LIFETIME BATH SYSTEMS OF FLORIDA, INC.

**FILED** Mar 23, 2011 Secretary of State

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

6835 NORCOOSSEE RD #17 10357 FALCON PARC BLVD ORLANDO, FL 32832

17-207

ORLANDO, FL 32832

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

10357 FALCON PARC BLVD 10357 FALCON PARC BLVD 17-207 ORLANDO, FL 32832

ORLANDO, FL 32832

FEI Number: 80-0604346 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:

GOWEN, TERRANCE P GOWEN, TERRANCE P 6835 NORCOOSSEE RD #17 10357 FÁLCON PARC BLVD ORLANDO, FL 32832 17-207 ORLANDO, FL 32832 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: 03/23/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

GOWEN, TERRANCE P Name:

10357 FALCON PARC BLVD 17-207 Address:

City-St-Zip: ORLANDO, FL 32832

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: TERRANCE P. GOWEN **PRES** 03/23/2011