

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000072265

**Entity Name:** LAUREN A. LOVELL, INC.

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1225 SW 34TH TERRACE  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

1225 SW 34TH TERRACE  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ANTAR, BILL CPA  
CAPE CORAL TAX & ACCOUNTING SERVICES LLC  
3306 DEL PRADO BLVD S  
CAPE CORAL, FL 33904 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: P  
Name: LOVELL, LAUREN A  
Address: 1225 SW 34TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914

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: LAUREN A. LOVELL

PRES

03/16/2012

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

\_\_\_\_\_  
Date