

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000019207

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** LILY CAST STONE DESIGN, INC.

**Current Principal Place of Business:**

4570 OLD TAMPA HWY  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

503 BAR DRIVE  
KISSIMMEE, FL 34759

**Current Mailing Address:**

4570 OLD TAMPA HWY  
KISSIMMEE, FL 34746

**New Mailing Address:**

503 BAR DRIVE  
KISSIMMEE, FL 34759

**FEI Number:** 27-5344811

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, NOEL  
4570 OLD TAMPA HWY  
KISSIMMEE, FL 34746 US

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

GONZALEZ, NOEL  
503 BAR DRIVE  
KISSIMMEE, FL 34759 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/30/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GONZALEZ, NOEL  
Address: 503 BAR DRIVE  
City-St-Zip: KISSIMMEE, FL 34759

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: NOEL GONZALEZ

P

01/30/2012

Electronic Signature of Signing Officer or Director

Date