

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30354

Entity Name: LAR-STOCK, INC.

FILED
May 14, 2009
Secretary of State

Current Principal Place of Business:

202 NORTH COURT STREET
FLORENCE, AL 35630

New Principal Place of Business:

Current Mailing Address:

201 S. COURT STREET
SUITE 610
FLORENCE, AL 35630 US

New Mailing Address:

FEI Number: 63-1024659 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LARDIE, BILL
Address: RTE 8, BOX 38-11
City-St-Zip: AMARILLO, TX

Title: PD () Delete
Name: STOCKARD, FRANK
Address: 6016 BROOKVALE LN.
City-St-Zip: KNOXVILLE, TN

Title: S () Delete
Name: CLARK, CYNTHIA W.
Address: 202 NORTH COURT STREET
City-St-Zip: FLORENCE, AL

Title: T () Delete
Name: ABROMS, MARTIN R.
Address: 202 N. COURT ST.
City-St-Zip: FLORENCE, AL

Title: D () Delete
Name: ANDERSON, JOEL R.
Address: 202 N. COURT ST.
City-St-Zip: FLORENCE, AL

Title: D () Delete
Name: ANDERSON, CHARLES C., JR
Address: 6016 BROOKVALE LN.
City-St-Zip: KNOXVILLE, TN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARTIN R ABROMS

T

05/14/2009

Electronic Signature of Signing Officer or Director

_____ Date