

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 07, 2001 08:00 AM**
Secretary of State**DOCUMENT # P94000008018**1. Entity Name
LFS, INC.

Principal Place of Business 825 PONTE VEDRA BLVD PONTE VEDRA BEACH 32082	FL	Mailing Address 825 PONTE VEDRA BLVD PONTE VEDRA BEACH 32082	FL
---	----	---	----

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

City & State	City & State
Zip	Country

4. FEI Number 59-3254042	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent HANSON KARL BJR 50 N. LAURA ST. SUITE 2800 JACKSONVILLE 32202 US	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--	--

8. 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 _____ (NOTE: Registered Agent signature required when reinstating)
DATE 03/07/2001

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
--	---	--

11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
<table><tr><td>TITLE</td><td>PST</td><td>☐ Delete</td></tr><tr><td>NAME</td><td>SMITH LAYTON F</td><td></td></tr><tr><td>STREET ADDRESS</td><td>825 PONTE VEDRA BLVD</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>PONTE VEDRA BEACH FL 32082</td><td></td></tr></table>	TITLE	PST	☐ Delete	NAME	SMITH LAYTON F		STREET ADDRESS	825 PONTE VEDRA BLVD		CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		<table><tr><td>TITLE</td><td>PST</td><td>☒ Change ☐ Addition</td></tr><tr><td>NAME</td><td>SMITH LAYTON F</td><td></td></tr><tr><td>STREET ADDRESS</td><td>825 PONTE VEDRA BLVD</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>PONTE VEDRA BEACH FL 32082</td><td></td></tr></table>	TITLE	PST	☒ Change ☐ Addition	NAME	SMITH LAYTON F		STREET ADDRESS	825 PONTE VEDRA BLVD		CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	PST	☐ Delete																							
NAME	SMITH LAYTON F																								
STREET ADDRESS	825 PONTE VEDRA BLVD																								
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082																								
TITLE	PST	☒ Change ☐ Addition																							
NAME	SMITH LAYTON F																								
STREET ADDRESS	825 PONTE VEDRA BLVD																								
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082																								
<table><tr><td>TITLE</td><td></td><td>☐ Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		☐ Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		☐ Change ☐ Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table><tr><td>TITLE</td><td></td><td>☐ Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		☐ Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		☐ Change ☐ Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table><tr><td>TITLE</td><td></td><td>☐ Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		☐ Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		☐ Change ☐ Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table><tr><td>TITLE</td><td></td><td>☐ Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		☐ Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		☐ Change ☐ Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table><tr><td>TITLE</td><td></td><td>☐ Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td>☐ Change ☐ Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		☐ Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		☐ Change ☐ Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAYTON F. SMITH	PST	03/07/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

CR2E034 (11/00)