

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000067281

Entity Name: LAZER CARPENTRY, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

2000 TARPON BAY DR N  
201  
NAPLES, FL 34119

## New Principal Place of Business:

212 OLD TAMIAMI TR  
NAPLES, FL 34110

## Current Mailing Address:

2000 TARPON BAY DR N  
201  
NAPLES, FL 34119

## New Mailing Address:

212 OLD TAMIAMI TR  
NAPLES, FL 34110

FEI Number: 65-0524326

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, GEORGE W  
2000 TARPON BAY DR N  
201  
NAPLES, FL 34119 US

## Name and Address of New Registered Agent:

SMITH, GEORGE W  
212 OLD TAMIAMI TR  
NAPLES, FL 34110 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:

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SMITH, GEORGE W  
Address: 2000 TARPON BAY DR N  
City-St-Zip: NAPLES, FL 34119

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITH, GEORGE W  
Address: 212 OLD TAMIAMI TR  
City-St-Zip: NAPLES, FL 34110

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: GEORGE WILLIAM SMITH

OWNE

04/24/2009

Electronic Signature of Signing Officer or Director

Date