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2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 MAY 31 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000026263 1. Entity Name CUSTOM PRINT SHOP, INC.	
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Principal Place of Business 1017 S. COMBEE RD. LAKELAND, FL 33801	Mailing Address 1017 COMBEE RD. LAKELAND, FL 33801
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DO NOT WRITE IN THIS SPACE



05182008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3369009	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**LUSBY, JOHN E
1017 S. COMBEE RD
LAKELAND, FL 33801**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Consent, being a power of attorney, is not required for this filing. SE: If Registered Agent signature required, enter name and address.

**FILE NOW!!! FEE IS \$150.00
Due by September 5, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

In accordance with s. 607.103(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
NAME TITLE STREET ADDRESS CITY-STATE-ZIP	PCEO LUSBY, JOHNNY E 1341 LEOLA AVE LAKELAND, FL
NAME TITLE STREET ADDRESS CITY-STATE-ZIP	S LUSBY, PATARICIA 1341 LEOLA AVE LAKELAND, FL
NAME TITLE STREET ADDRESS CITY-STATE-ZIP	
NAME TITLE STREET ADDRESS CITY-STATE-ZIP	
NAME TITLE STREET ADDRESS CITY-STATE-ZIP	

01/12/06 90182 002-\$150.00

**DO NOT WRITE
IN THIS SPACE**

[Handwritten signature]
5/31

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an Attachment list or address, without other like empowerment.

SIGNATURE: *[Handwritten signature]* 1-10-06 863-668-5692
SIGNATURE AND TITLE OF PERSON MAKING OR SIGNING OFFICER OR DIRECTOR Date Severe Place

2/2

MEMORANDUM

Date: May 31, 2006
To: Debra Cooper / *Michelle Milligan*
Florida Department of Corporations
From: Vicky Edwards
Cheatham & Golen Financial Services
Re: Custom Print Shop – Doc #: P96000026263
Lusby Properties, Inc. – Doc #: P99000053897

Debra,

Attached please find a copy of my fax sent May 19, 2006. I have been advised that it never made its way to you so I am resending.

It is my understanding that both of Mr. Lusby's payments of \$150 your office received January 12, 2006 were applied to Lusby Properties and it shows an overage payment of \$150. Upon receipt of this fax it is also my understanding that you will transfer the overage payment from Lusby Properties to Custom Print Shop as originally submitted resulting in both corporations being renewed for 2006.

Please call (863-688-0882) or email (vicky@cg-cpas.com) me when the correction has been made so I can notify my client that we have resolved the discrepancy.

Thanks for your assistance.