

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000054752

FILED  
Feb 18, 2008  
Secretary of State

Entity Name: SUSAN'S SALON OF LEE COUNTY, INC.

## Current Principal Place of Business:

18900 N. TAMiami TRAIL  
#8  
N. FORT MYERS, FL 33903

## New Principal Place of Business:

## Current Mailing Address:

18900 N. TAMiami TRAIL  
#8  
N. FORT MYERS, FL 33903

## New Mailing Address:

FEI Number: 65-0679736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORREA, SUSAN  
1213 S.E. 8TH STREET, #73  
CAPE CORAL, FL 33990 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CORREA, SUSAN  
Address: 18900 N. TAMiami TRAIL, #8  
City-St-Zip: N. FORT MYERS, FL 33903

Title: S (X) Delete  
Name: AUER, THERESA  
Address: 2737 GARDEN STREET  
City-St-Zip: N. FORT MYERS, FL 33917

Title: CH ( ) Delete  
Name: ROOS, ANN  
Address: 3402 COUNTRY CLUB  
City-St-Zip: CAPE CORAL, FL

Title: CH (X) Delete  
Name: AUER, WALTER D  
Address: 2737 GARDEN ST.  
City-St-Zip: NORTH FORT MYERS, FL 33917

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: CORREA, SUSAN  
Address: 18900 N. TAMiami TRAIL, #8  
City-St-Zip: N. FORT MYERS, FL 33903

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

Title: D (X) Change ( ) Addition  
Name: ROOS, ANN  
Address: 3402 COUNTRY CLUB  
City-St-Zip: CAPE CORAL, FL

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: SUSAN CORREA

PSD

02/18/2008

Electronic Signature of Signing Officer or Director

Date