2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 31, 2005 8:00 am Secretary of State

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DOCUMENT # P99000077375 1. Entity Name LAWSERV, CHARTERED					08-31-200	5 90013 011 ***1		
Principal Place of Business 2033 MAIN ST. SUITE 100 SARASOTA, FL 34237		Mailing Address 2033 MAIN ST. SUITE 100 SARASOTA, FL 34237		1 1981 1981 110			J06424	
2. Principal Place of Business 8586 PoHer Park Drive		3. Mailing Address 8586 Potter Pank Drive						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		08212005	Chg-P	CR2E034 (10/03)		
City & State Sarasofa, Fh		Scrasota, FL		4. FEI Numbe 65-094		ļ 	oplied For ot Applicable	
Zip 34236	Country	^{Zip} 34238	Sarasota		of Status Desired	Sa.75 Add Fee Require		
	6. Name and Address of Current I	Registered Agent		7. Name and	Address of New F	Registered Agent	···	
COICDIAN	ID DALBH		Name	Friedland, 1	Ralph			
FRIEDLAND, RALPH 2033 MAIN STREET SUITE 100			Street Add	Street Address (P.O. Box Number is Not Acceptable) 1990 main St., Suite 700				
SARASOTA, FL 34237			City	City Sarasota FL Zip Code 34236				
The above named entity submits this statement for the purpose of changing its registered office or re					th, in the State of Flo			
	ions of regionered agent.	ld -	RALPH L. FRI	IEDLAND	8/z	9/05		
	Signature Typed or printed name of registered ac	and the if applicable. (NOTE.	Registered Agent signature	required when reinstating)		DATE		
1	LE NOW!!! FEE IS \$150.00 ue by September 7, 2005	Election Campaig Trust Fund Contri		\$5.00 May Be Added to Fees	In accordance corporation did	with s. 607.193(2)(b), I not receive the prior	F.S., the notice.	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	CHANGES TO OFF	FICERS AND DIRECTOR	RS IN 11	
TITLE NAME STREET ADDRESS	FRIEDLAND, RALPH L 2033 MAIN ST., STE 100	☐ Delete	TITLE NAME STREET ADDRESS	Friedland, 1990 Main	Ralph St., Ste 70	Change	☐ Addition !	
CITY-ST-ZIP	SARASOTA, FL 34237		CITY-ST-ZIP	Sarasato	1 + L 37			
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		□ Dĕiele	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
			B	-		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	dia Continui dia Conti	V) Clarida Sensita			

I hereby certify that the information supplied with this lilling does not qualify for the exemption stated in Section 119.7(3)(f), Profited Statutes. Turtier 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 with an address, with all giber like empowered.

SIGNATURE: 🔎