

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V39650

FILED
Jan 08, 2007
Secretary of State

Entity Name: LAWSON AND CO. III, INC.

Current Principal Place of Business:

6033 HOLLYWOOD BLVD
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

6033 HOLLYWOOD BLVD
HOLLYWOOD, FL 33024 US

New Mailing Address:

FEI Number: 65-0334536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWSON, WILLIAM A.
6033 HOLLYWOOD BLVD
HOLLYWOOD, FL 33024 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: D () Delete
Name: PARISI, CYNTHIA A
Address: 6731 NW 22 CT
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: LAWSON, WILLIAM A.,
Address: 8640 NW 19 ST
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: PEREZ, MIGUEL
Address: 5223 SW 128 PL
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: LAWSON, RICHARD J
Address: 3200 PORT ROYALE DRIVE N #2108
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: LAWSON, DANIEL E.,
Address: 8341 NW 23 ST
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: PARISI, CYNTHIA A
Address: 6731 NW 22 CT
City-St-Zip: MARGATE, FL 33063

Title: P (X) Change () Addition
Name: LAWSON, WILLIAM A.,
Address: 8640 NW 19 ST
City-St-Zip: PEMBROKE PINES, FL 33024

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CYNTHIA A. PARISI

V

01/08/2007

Electronic Signature of Signing Officer or Director

Date