2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V61748

FILED Apr 13, 2009 Secretary of State

Entity Name: LAWSON-HALL LABORATORIES, INC.

Current Principal Place of Business:			New Principal Place of Business:	
SUITE D	SEWATER DR D, FL 32810			
	ailing Addre	ss:	New Mailing Addres	ss:
SUITE D	SEWATER DR D, FL 32810			
El Number	: 59-3148971	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	USSELL L., JF EWATER DR			
	O, FL 32810	US		
ORLAND(The above	•		ourpose of changing its registere	ed office or registered agent, or both,
ORLAND(The above	e named entity e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
ORLANDO The above In the State	e named entity e of Florida. RE:			ed office or registered agent, or both, Date
ORLANDO The above In the State SIGNATU	e named entity e of Florida. RE: Electro	submits this statement for the		
DRLANDO The above the State SIGNATU Section Ca	e named entity e of Florida. RE: Electro	submits this statement for the particles of Registered Aging Trust Fund Contribution ().	ent	Date
DRLANDO The above the State SIGNATU Section Ca	e named entity e of Florida. RE: Electro mpaign Financii S AND DIREG	submits this statement for the price Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete ELL L., JR. ATER DR #D	ent	
DRLANDO The above In the State BIGNATU Election Car DFFICER Italiane: Iddress:	e named entity e of Florida. RE: Electro mpaign Financii S AND DIREC PD (SMITH, RUSS 6160 EDGEW ORLANDO, FL	submits this statement for the price Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete ELL L., JR. ATER DR #D) Delete ELL LAWSON GTON COURT	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR

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: RUSSELL L SMITH VP 04/13/2009