

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 574550

**Entity Name:** LAMPL/HERBERT CONSULTANTS, INC.**Current Principal Place of Business:**546 E. CALL STREET  
TALLAHASSEE, FL 32301**Current Mailing Address:**P.O. BOX 10129  
TALLAHASSEE, FL 32302**FEI Number: 59-1960341****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**LAMPL, LINDA LPH.D.  
546 E CALL ST  
TALLAHASSEE, FL 32301 US*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**Officer/Director Detail :**

Title	PDA
Name	LAMPL, LINDA LPH.D.
Address	546 E CALL ST
City-State-Zip:	TALLAHASSEE FL 32301

Title	VPD
Name	HERBERT, THOMAS APH.D.
Address	546 E CALL ST
City-State-Zip:	TALLAHASSEE FL 32301

Title	DVP
Name	BUTSCH, MARK J
Address	1163 OLD FORT DRIVE
City-State-Zip:	TALLAHASSEE FL 32301

Title	DVP
Name	BULLOCK, MARTHA A
Address	6724 VISALIA PLACE
City-State-Zip:	TALLAHASSEE FL 32317

Title	TD
Name	BURTON, PATRICIA L
Address	1163 OLD FORT DRIVE
City-State-Zip:	TALLAHASSEE FL 32301

Title	D
Name	BULLOCK, JAMES M
Address	6724 VISALIA PLACE
City-State-Zip:	TALLAHASSEE FL 32317

*I hereby 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 all other like empowered.*

**SIGNATURE: MARTHA A BULLOCK****DIRECTOR / VP****01/13/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date