

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J63850

**FILED  
Mar 04, 2013  
Secretary of State  
CC1272442980**

**Entity Name:** LINCOLN COMMERCIAL PROPERTIES, INC.

**Current Principal Place of Business:**

LINCOLN COMMERCIAL  
4884 FRONT ST  
PONCE INLET, FL 32127

**Current Mailing Address:**

LINCOLN COMMERCIAL  
P.O. BOX 290727  
PORT ORANGE, FL 32129 US

**FEI Number: 59-2805831**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JOHNSON, LYDER  
4884 FRONT ST  
PONCE INLET, FL 32127 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 PT  
Name JOHNSON, LYDER  
Address 4884 FRONT ST  
City-State-Zip: PONCE INLET FL 32127

Title VS  
Name JOHNSON, SIMONE S.  
Address 4884 FRONT ST  
City-State-Zip: PONCE INLET FL 32127

Title AS  
Name JOHNSON, SIMONE S  
Address 4884 FRONT ST  
City-State-Zip: PONCE INLET FL 32127

Title VP  
Name JOHNSON, SIMONE S  
Address 4884 FRONT ST  
City-State-Zip: PONCE INLET FL 32127

*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: LYDER JOHNSON**

**PT**

**03/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date