

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850412

FILED
Feb 19, 2009
Secretary of State

Entity Name: LESCO RESTORATIONS, INC.

Current Principal Place of Business:

1341 NAZARETH CHURCH RD
SPARTANBURG, SC 29301

New Principal Place of Business:

Current Mailing Address:

1341 NAZARETH CHURCH RD
SPARTANBURG, SC 29301

New Mailing Address:

FEI Number: 57-0787175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: CHAPMAN, CAROLYN W
Address: 405 MASTERS POINT
City-St-Zip: DUNCAN, SC 29334

Title: VP () Delete
Name: LAURO, PASQUALE J
Address: 2529 WILCOX CIRCLE
City-St-Zip: DENVER, NC 28037

Title: ST () Delete
Name: KLECKLEY, WILLIAM
Address: 7 AUTUMN VIEW RIDGE
City-St-Zip: TRAVELERS REST, SC 29690

Title: CEO () Delete
Name: CHAPMAN, TOBY G
Address: 405 MASTERS POINT
City-St-Zip: DUNCAN, SC 29334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: WILLIAM S KLECKLEY

TREA

02/19/2009

Electronic Signature of Signing Officer or Director

Date