

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K58754

FILED  
Jan 10, 2012  
Secretary of State

**Entity Name:** LA BELLE VENTURE, INC.

**Current Principal Place of Business:**

505 GREENWOOD AVE  
LEHIGH ACRES, FL 33972 US

**New Principal Place of Business:**

**Current Mailing Address:**

505 GREENWOOD AVE  
LEHIGH ACRES, FL 33972 US

**New Mailing Address:**

**FEI Number:** 65-0097503      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WAFLER, S. JANE  
505 GREENWOOD AVE  
LEHIGH ACRES, FL 33972 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: WAFLER, RAY J.  
Address: 505 GREENWOOD AVE  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: DST  
Name: WAFLER, S. JANE  
Address: 505 GREENWOOD AVE  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VD  
Name: WAFLER, LANCE H.  
Address: 505 GREENWOOD AVE  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VD  
Name: DEAN, LAURA K.(WAFLER)  
Address: 230 CALLWAY AVE. SO.  
City-St-Zip: LEHIGH ACRES, FL 33974

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: S. JANE WAFLER

ST

01/10/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date