

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L44575

Entity Name: 5 L.D., INC.

FILED  
Feb 06, 2012  
Secretary of State

**Current Principal Place of Business:**

16649 N. COUNTY ROAD 349  
MCALPIN, FL 32062

**New Principal Place of Business:**

**Current Mailing Address:**

16649 N. COUNTY ROAD 349  
MCALPIN, FL 32062

**New Mailing Address:**

FEI Number: 58-1885308

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAWTHORNE, LLOYD C.  
16649 N. COUNTY ROAD 349  
MCALPIN, FL 32062 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: P  
Name: HAWTHORNE, KAY  
Address: 16649 N COUNTY ROAD 349  
City-St-Zip: MCALPIN, FL 32062

Title: ST  
Name: HAWTHORNE, LLOYD C  
Address: 16649 N COUNTY ROAD 349  
City-St-Zip: MCALPIN, FL 32062

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: KAY HAWTHORNE

P

02/06/2012

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

\_\_\_\_\_ Date