## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000044265

Entity Name: LACEFRONT-WIG.COM INC

Apr 30, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3283 WARNELL DRIVE 9050 CYPRESS GREEN DRIVE JACKSONVILLE, FL 32216

101

JACKSONVILLE, FL 32256

**Current Mailing Address: New Mailing Address:** 

3283 WARNELL DRIVE 10150 BELLE RIVE BLVD. JACKSONVILLE, FL 32216

2108

JACKSONVILLE, FL 32256

FEI Number: 26-2550617 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STRUNK, JULIA A STRUNK, JULIA W 3283 WARNELL DRIVE 10150 BELLE RIVE BLVD.

JACKSONVILLE, FL 32216 US 2108 JACKSONVILLE, FL 32256 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: JULIA STRUNK 04/30/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

STRUNK, JULIA W Name:

10150 BELLE RIVE BLVD. UNIT 2108 Address:

City-St-Zip: JACKSONVILLE, FL 32256

Title:

Name: STRUNK, THOMAS M

Address: 10150 BELLE RIVE BLVD. UNIT 2108

JACKSONVILLE, FL 32256 City-St-Zip:

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.

Ρ SIGNATURE: JULIA STRUNK 04/30/2011