

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000075582

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: LAB FIRST INC.

**Current Principal Place of Business:**

182 SPARKLEBERRY BLVD  
QUINCY, FL 32351

**New Principal Place of Business:**

**Current Mailing Address:**

182 SPARKLEBERRY BLVD  
QUINCY, FL 32351

**New Mailing Address:**

FEI Number: 26-3157171

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATHEWS, ANTHONY D  
182 SPARKLEBERRY BLVD.  
QUINCY, FL 32351 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: MATHEWS, ANTHONY D  
Address: 182 SPARKLEBERRY BLVD  
City-St-Zip: QUINCY, FL 32351

Title: VP  
Name: MATHEWS, MARY A  
Address: 182 SPARKLEBERRY BLVD  
City-St-Zip: QUINCY, FL 32351

Title: T  
Name: RIGGINS, VANN  
Address: 4523 WESLEY DR.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: ASS.  
Name: MCWHITE, CLARENCE  
Address: 3153 ROBINSON OAK DR  
City-St-Zip: TALLAHASSEE, FL 32303

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: MARY MATHEWS

OWNE

04/30/2012

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

\_\_\_\_\_ Date