

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134177

FILED
Jan 03, 2005
Secretary of State

Entity Name: LINDSEY & MACKE BINDERY & PRINTING EQUIPMENT, INC.

Current Principal Place of Business:

11626 PROSPEROUS DR.
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

11626 PROSPEROUS DR.
ODESSA, FL 33556

New Mailing Address:

FEI Number: 76-0745724 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

L & M EQUIPMENT
11626 PROSPEROUS DR.
ODESSA, FL 33556 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: D () Delete
Name: MACKE, THOMAS P
Address: 1309 CATALINA ROAD, E.
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: LINDSEY, EDGAR LEE JR.
Address: 4931 FORT PECK ROAD
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S () Delete
Name: KISER, RONALD
Address: 6126 SEASIDE DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D () Delete
Name: HYLTON, SHEAN W
Address: 2008 GOLDDUST CT.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: MCLAREN, THOMAS A
Address: 1211 LORETTO CIR.
City-St-Zip: ODESSA, FL 33556

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: D (X) Change () Addition
Name: HYLTON, SHEAN W
Address: 2008 GOLDDUST CT.
City-St-Zip: TRINITY, FL 34656

Title: D (X) Change () Addition
Name: MCLAREN, THOMAS A
Address: 2428 BRINLEY DRIVE
City-St-Zip: TRINITY, FL 34656

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RONALD L KISER

S

01/03/2005

Electronic Signature of Signing Officer or Director

_____ Date