

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000013687

FILED
Feb 13, 2009
Secretary of State

Entity Name: LAKE WALES BUILDING TRADES CENTER, INC.

Current Principal Place of Business:

107 W. ORANGE AVENUE
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

107 W. ORANGE AVENUE
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 59-3360334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOLLOUGH, BOBBY G
5154 VALENCIA ST.
LAKE WALES, FL 33898 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: PD () Delete
Name: MCCOLLOUGH, BOBBY G
Address: 5154 VALENCIA ST.
City-St-Zip: LAKE WALES, FL 33898

Title: ST () Delete
Name: BOWEN, BETTY
Address: 2437 FOREST DR.
City-St-Zip: LAKE WALES, FL 33898

Title: VPD () Delete
Name: MCCOLLOUGH, THERESA C
Address: 5154 VALENCIA ST.
City-St-Zip: LAKE WALES, FL 33898

Title: VPD () Delete
Name: KARG, PAUL
Address: 40 ALDO RD
City-St-Zip: BABSON PARK, FL 33857

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: MCCOLLOUGH, THERESA C
Address: 5154 VALENCIA ST.
City-St-Zip: LAKE WALES, FL 33898

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BOBBY G. MCCOLLOUGH

PRES

02/13/2009

Electronic Signature of Signing Officer or Director

_____ Date