MAIL 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000001574

1. Entity Name

L&P ACQUISITION COMPANY-56



FILED
May 05, 2006 08:00 AM
Secretary of State

Principal Place of Business

NO. 1 LEGGETT ROAD CARTHAGE, MO 64836 Mailing Address

NO. 1 LEGGETT ROAD CARTHAGE, MO 64836



DO NOT WRITE IN THIS SPACE

04262006 No Chg-P CR2E034 (11/05)

4. FEI Number | Applied For 32-0005563 | Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

•	tions of registered agent.		; •				
SIGNATURE_	Signature, Typed or printed home of registered agent and title i	fapplicable. (NOTE. R	egistered Agent signature	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaign Trust Fund Contribution		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS			<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT DESONIER, DAVID M 3439 SUNSET DRIVE JOPLIN, MO 64804				U00000563378 05/20/06-80007-020 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DOUGLAS, SCOTT S 1218 S. MAPLE CARTHAGE, MO 64836				05/20/06-80007-020 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS FLANIGAN, MATTHEW C 1309 S. MAIN CARTHAGE, MO 64836			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GLASSMAN, KARL G 9732 EARLY LANE CARTHAGE, MO 64836			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PURSER, KENNETH W NO. 1 LEGGETT RD CARTHAGE, MO 64836						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GRONEWALD, AILEEN A 4030 E. 7TH STREET JOPLIN, MO 64801						

Indicated on this report or supplemental good is the admitted my 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 trusted empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. To the best of ny knowledge one belief.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/01/06 417-358-8131