

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90094 026 ***150.00

DOCUMENT # F04000003770	
1. Entity Name LP INNOVATIONS, INC.	



Principal Place of Business 66 B STREET NEEDHAM, MA 02494	Mailing Address 66 B STREET NEEDHAM, MA 02494
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2. Principal Place of Business 555 Turnpike Street Suite, Apt. #, etc.	3. Mailing Address 555 Turnpike Street Suite, Apt. #, etc.
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City & State Canton, MA	City & State Canton, MA
Zip 02021	Country
Zip 02021	Country

04172006 Chg-P CR2E034 (11/05)

4. FEI Number 13-4222128	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	
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7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.	
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SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVIN, DAVID A 555 TURNPIKE STREET CANTON, MA 02021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEMREICH, DENNIS R 555 TURNPIKE STREET CANTON, MA 02021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAY, STEVEN 66 B STREET NEEDHAM, MA 02494 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARX WERELBLATT, ELIZABETH 86 B STREET NEEDHAM, MA 02494 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LAUE, DOUGLAS A 66 B STREET NEEDHAM, MA 02494 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:	4/17/06	781-830-0900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #



ATTACHMENT
40055951
#F04000003770

April 19, 2006

Via Federal Express

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Dear Sir or Madam:

Enclosed please find the For Profit Corporation Annual Report for the year 2006 for LP Innovations, Inc. and the \$150 filing fee.

Please contact me at 781-830-0900 ext. 1509 if you have any questions regarding the enclosed.

Sincerely yours,

Elizabeth Marx Wexelblatt
General Counsel

Enclosure