## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F09000001110

FILED Mar 22, 2011 Secretary of State

Entity Name: (LOUISIANA) COMMERCIAL PROPERTIES MANAGEMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business:

402 N. 4TH ST. ATTEN: ACCT PAY DEPT. BATON ROUGE, LA 708025506

Current Mailing Address: New Mailing Address:

402 N. 4TH ST. ATTEN: ACCT PAY DEPT. BATON ROUGE, LA 708025506

FEI Number: 72-0594389 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NRAI SERVICES, INC. 515 E. PARK AVENUE TALLAHASSEE, FL 32301 US

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: PD

Name: DAVIES, JOHN G CEO Address: 402 N. 4TH ST.

City-St-Zip: BATON ROUGE, LA 708025506

Title: VP

Name: GAVRELIS, CHRISTOPHER G

Address: 402 N. 4TH ST.

City-St-Zip: BATON ROUGE, LA 708025506

Title: VP

Name: HENSON, TIMOTHY W Address: 402 N 4TH ST

City-St-Zip: BATON ROUGE, LA 708025506

Title: VPT

Name: MARTIN, CAROLYN E

Address: 402 N. 4TH ST.

City-St-Zip: BATON ROUGE, LA 708025506

Title:

Name: TRAVIS, DEBORAH P Address: 402 N. 4TH ST.

City-St-Zip: BATON ROUGE, LA 708025506

Title: AS

Name: NUGENT, RENEE G Address: 402 N. 4TH ST.

City-St-Zip: BATON ROUGE, LA 708025506

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: JOHN G. DAVIES PD 03/22/2011