2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# F98000005315

Entity Name: LMA NORTH AMERICA, INC.

Current Principal Place of Business:

4660 LAJOLLA VILLAGE DR STE 900
SAN DIEGO, CA 92122

New Principal Place of Business:

Current Mailing Address:

4660 LAJOLLA VILLAGE DR STE 900
SAN DIEGO, CA 92122

New Mailing Address:

FEI Number: 33-0785550 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: SWETE, TREVOR
Address: 4660 LAJOLLA VILLAGE DR. STE. 900
City-St-Zip: SAN DIEGO, CA 92122

Title: VPCS ( ) Delete
Name: WARFORD, MICHAEL
Address: 4660 LAJOLLA VILLAGE DRIVE ST 900
City-St-Zip: SAN DIEGO, CA 92122

Title: D ( ) Delete
Name: BLOCK, STEVEN
Address: 4660 LAJOLLA VILLAGE DR. STE 900
City-St-Zip: SAN DIEGO, CA 92122

Title: D ( ) Delete
Name: COOPER, JANE G
Address: 4660 LAJOLLA VILLAGE DR STE. 900
City-St-Zip: SAN DIEGO, CA 92122

Title: D ( ) Delete
Name: BRIANT, MICHAEL
Address: 4660 LAJOLLA VILLAGE DR. STE. 900
City-St-Zip: SAN DIEGO, CA 92122

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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

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

Title: CEO ( ) Change (X) Addition
Name: BLOCK, STEVEN
Address: 4660 LA JOLLA VILLAGE DR., STE. 900
City-St-Zip: SAN DIEGO, CA 92122

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: MICHAEL WARFORD VPCS 01/08/2009

Electronic Signature of Signing Officer or Director — Date