

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G67527

FILED
Jan 13, 2006
Secretary of State

Entity Name: LYNNE PITTARD ORIGINALS, INC.

Current Principal Place of Business:

1411 LAKE VICTORIA DRIVE
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

1411 LAKE VICTORIA DRIVE
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 59-2360577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITTARD, LYNNE
1411 LAKE VICTORIA DRIVE
LAKE WORTH, FL 33461 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: DP () Delete
Name: PITTARD, LYNNE,
Address: 1411 LAKE VICTORIA DR
City-St-Zip: LAKE WORTH, FL

Title: V () Delete
Name: PITTARD, WILLIAM,
Address: 1411 LAKE VICTORIA DR.
City-St-Zip: LAKE WORTH, FL

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PITTARD, LYNNE,
Address: 1411 LAKE VICTORIA DR
City-St-Zip: LAKE WORTH, FL 33461

Title: VP (X) Change () Addition
Name: PITTARD, WILLIAM,
Address: 1411 LAKE VICTORIA DR.
City-St-Zip: LAKE WORTH, FL 33461

Title: SEC () Change (X) Addition
Name: ELEANOR DAWN MALEY,
Address: 1413 LAKE VICTORIA DRIVE
City-St-Zip: LAKE WORTH, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the 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: LYNNE PITTARD

_____ Electronic Signature of Signing Officer or Director

PRES

01/13/2006

_____ Date