## 2007 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Apr 19, 2007 08:00 A Secretary of State DOCUMENT # J27646 1. Entity Name LW CONSULTING SERVICES, INC. Principal Place of Business Mailing Address 599 9TH ST. NORTH 599 9TH ST. NORTH **SUITE 207** SUITE 207 NAPLES, FL 34102-5625 NAPLES, FL 34102-5625 CR2E034 (11/05) No Cha-P 01192007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2705428 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GROSSENBACHER, J ROBERT DO NOT WRITE 599 9TH ST, N **STE 207** IN THIS SPACE NAPLES, FL 34102 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. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GROSSENBERGER, LYNNETTE STREET ADDRESS 599 9T ST, N, STE 207 CITY-ST-ZIP NAPLES, FL 34102 ~ U00000716961: NAME 04/30/07-80029-005\*150.0b STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7/P NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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 accuste 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

SIGNATURE:

CITY-ST-ZIP