

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J72465

Entity Name: LAR-BRA', INC.

FILED
Feb 23, 2009
Secretary of State

Current Principal Place of Business:

404 SOUTH WOODROW WILSON
PLANT CITY, FL 33564

New Principal Place of Business:

404 SOUTH WOODROW WILSON
PLANT CITY, FL 33563

Current Mailing Address:

404 SOUTH WOODROW WILSON
P.O. BOX 1285
PLANT CITY, FL 33564

New Mailing Address:

P.O. BOX 1285
PLANT CITY, FL 33564

FEI Number: 59-2824768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BODENMILLER, JOE
404 SOUTH WOODROW WILSON
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

BODENMILLER, BASIL J
404 SOUTH WOODROW WILSON
PLANT CITY, FL 33563 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: BASIL J. BODENMILLER

02/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOE BODENMILLER,
Address: 404 S. WOODROW WILSON
City-St-Zip: PLANT CITY, FL 33563

Title: D () Delete
Name: BODENMILLER, JANETH, W.
Address: 404 S. WOODROW WILSON
City-St-Zip: PLANT CITY, FL 33563

Title: D () Delete
Name: STEPHENS, LAURIE B.,
Address: 404 S. WOODROW WILSON
City-St-Zip: PLANT CITY, FL 33563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BODENMILLER, BASIL J
Address: 404 S. WOODROW WILSON
City-St-Zip: PLANT CITY, FL 33563

Title: D (X) Change () Addition
Name: BODENMILLER, JANETH W
Address: 404 S. WOODROW WILSON
City-St-Zip: PLANT CITY, FL 33563

Title: D (X) Change () Addition
Name: STEPHENS, LAURIE B
Address: 404 S. WOODROW WILSON
City-St-Zip: PLANT CITY, FL 33563

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: LAURIE B. STEPHENS

D

02/23/2009

Electronic Signature of Signing Officer or Director

Date