

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J92529

FILED
Mar 09, 2010
Secretary of State

Entity Name: LDP, INC.

Current Principal Place of Business:

1 INDEPENDENT DRIVE
STE 1600
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

1 INDEPENDENT DR
SUITE 1600
JACKSONVILLE, FL 322025009 US

New Mailing Address:

FEI Number: 59-2930320 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, DAVID R
1 INDEPENDENT DR
SUITE 1600
JACKSONVILLE, FL 32202 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: C
Name: LOVETT, RADFORD D
Address: 1 INDEPENDENT DR, STE. 1600
City-St-Zip: JACKSONVILLE, FL 32202

Title: VT
Name: SHIELDS, DAVID R
Address: 1 INDEPENDENT DR STE 1600
City-St-Zip: JACKSONVILLE, FL 32202

Title: VS
Name: MELLO, JEANNINE
Address: 1 INDEPENDENT DRIVE STE 1600
City-St-Zip: JACKSONVILLE, FL 32202

Title: DP
Name: LOVETT, WILLIAM R II
Address: 1 INDEPENDENT DRIVE STE 1600
City-St-Zip: JACKSONVILLE, FL 32202

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: JEANNINE MELLO

VS

03/09/2010

Electronic Signature of Signing Officer or Director

_____ Date