

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K00634

FILED  
Mar 12, 2008  
Secretary of State

Entity Name: LTP MANAGEMENT GROUP, INC.

## Current Principal Place of Business:

4411 CLEVELAND AVE.  
FT. MYERS, FL 33901 US

## New Principal Place of Business:

## Current Mailing Address:

4411 CLEVELAND AVE.  
FT. MYERS, FL 33901 US

## New Mailing Address:

FEI Number: 65-0015671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMEONE, RICHARD J  
4411 CLEVELAND AVENUE  
FT MYERS, FL 33901 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: DCEO ( ) Delete  
Name: LAGESCHULTE, DAVID L.,  
Address: 4411 CLEVELAND AVE  
City-St-Zip: FT. MYERS, FL

Title: DP ( ) Delete  
Name: BRAUNER, TERRY K.,  
Address: 4411 CLEVELAND AVE  
City-St-Zip: FT MYERS, FL 33901

Title: DTS ( ) Delete  
Name: LYNCH, PAUL W.,  
Address: 4411 CLEVELAND AVD  
City-St-Zip: FT MYERS, FL

Title: VP ( ) Delete  
Name: LYNCH, PAUL W.,  
Address: 4411 CLEVELAND AVE  
City-St-Zip: FT MYERS, FL 33901

## 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:

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: PAUL LYNCH

VP

03/12/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date