

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90173 009 ***150.00

DOCUMENT # K59398

1. Entity Name

L.B.P. ENTERPRISES, INC.



Principal Place of Business

4060 CORRIENTES CT S
JACKSONVILLE FL 32217

Mailing Address

P.O. BOX 56521
JACKSONVILLE FL 32241

Phone: 904-737-2829



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2928769

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

BACKUS, FRANCIS C
4060 CORRIENTES CT S
JACKSONVILLE FL 32217

7. Name and Address of New Registered Agent

Name

Francis C. Backus

Street Address (P.O. Box Number is Not Acceptable)

4060 Corrientes Court S.

City

Jacksonville

FL

Zip Code

32217

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

Francis C. Backus

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/12/06

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME BASKIS, LEE F
STREET ADDRESS 4060 CORRIENTES CT S
CITY-ST-ZIP JACKSONVILLE FL 32217

TITLE VP ☐ Delete
NAME BACKUS, FRANCIS C
STREET ADDRESS 4060 CORRIENTES CT S
CITY-ST-ZIP JACKSONVILLE FL 32217

TITLE S ☐ Delete
NAME BACKUS, CHRIS
STREET ADDRESS 150 LONG LOTS RD.
CITY-ST-ZIP WESTPORT CT 06880

TITLE T ☒ Delete
NAME PETTIT, RYAN
STREET ADDRESS 1002 TROWBRIDGE
CITY-ST-ZIP HOUSTON TX

TITLE MGRD ☐ Delete
NAME BACKUS, FRANCIS C
STREET ADDRESS CORRIENTES CT S.
CITY-ST-ZIP JAXSONVILLE FL

TITLE D ☒ Delete
NAME PETTIT, PAGE
STREET ADDRESS 1002 TROWBRIDGE
CITY-ST-ZIP HOUSTON TX

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director ☒ Change ☒ Addition
NAME Backus, Melissa
STREET ADDRESS 440 E. 88th St. Apt. PHC
CITY-ST-ZIP N.Y., N.Y. 10128

TITLE Director ☒ Change ☒ Addition
NAME PETTIT, CASEY
STREET ADDRESS 1610 N 5th St
CITY-ST-ZIP San Marcos, Texas 78666

TITLE Director ☒ Change ☐ Addition
NAME PETTIT, RYAN
STREET ADDRESS 1031 N. Parkside Dr #218
CITY-ST-ZIP Tempe, Ariz 85281

TITLE Director ☒ Change ☐ Addition
NAME PETTIT, PAIGE
STREET ADDRESS 7459 Fallen Trail
CITY-ST-ZIP Ft Worth, Texas 76123

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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 an address, with all other like empowered.

SIGNATURE:

Francis C. Backus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/12/06

904-737-2829