2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2008 8:00 am
Secretary of State
04-09-2008 90019 030 ***150.00

DOCUMENT # K59398

1. Entity Name

L.B.P. ENTERPRISES, INC.

Principal Place of Business	Mailing Address
4060 CORRIENTES CT S JACKSONVILLE FL 32217	P.O. BOX 56521 JACKSONVILLE FL 32241

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4060 CORRIENTES	PO. Box 56521
Suite, Apt. #, etc. Court S	Suite, Apt. #, etc.
City & State Jacksonville, FL	City & State Jax FL. 32241
Zip 32217 Country Duval	Zip 3224/ Country Duval

4. FEI Number 59-2928769 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BACKUS, FRANCIS C
4060 CARRIENTES CRT S
JACKSONVILLE FL 32217

7. Name and Address of New Registered Agent

Name: Marjorie Backus
Street Address (P.O. Box Number is Not Acceptable): 4060 CORRIENTES COURT S.
City: Jacksonville. FL Zip Code: 322.17

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BASKIS, LEE F 4060 CORRIENTES CT S JACKSONVILLE FL 32217	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P P. BACKUS, LEE F. 4060 CORRIENTES COURT S	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TEITIT, CASEY 1610 N SH ST SAN MARCOS TX 78666	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PETTIT, CASEY	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PETIT, RYAN 1031 N PARKSIDE DR 218 TEMPE AZ 85281	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PETTIT, RYAN	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PETIT, PAIGE 7459 FALLEN TRL FORT WORTH TX 76123	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PETTIT, PAIGE	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRD BACKUS, FRANCIS C CORRIENTES CT S. JAXSONVILLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRD BACKUS, MARJORIE 4060 CORRIENTES CT. S.	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: L.F. Backus LEE F. BACKUS 3/20/2008 904 737 2829
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #