

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L02998

Entity Name: LCM TRUCKING, INC.

FILED  
Feb 28, 2009  
Secretary of State

**Current Principal Place of Business:**

34546 MERION CT.  
DADE CITY, FL 33525 US

**New Principal Place of Business:**

**Current Mailing Address:**

34546 MERION CT.  
DADE CITY, FL 33525 US

**New Mailing Address:**

FEI Number: 59-2962007      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MURPHY, LORRAINE  
34546 MERION CT.  
DADE CITY, FL 33525 US

**Name and Address of New Registered Agent:**

MURPHY, LUKE P  
34546 MERION COURT  
DADE CITY, FL 33525 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: LUKE MURPHY

02/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Change (X) Addition  
Name: MURPHY, LUKE P  
Address: 34546 MERION COURT  
City-St-Zip: DADE CITY, FL 33525

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: LUKE MURPHY

P

02/28/2009

Electronic Signature of Signing Officer or Director

Date