

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000082600

FILED
Sep 05, 2006
Secretary of State**Entity Name:** LCM ENTERPRISES, LLC**Current Principal Place of Business:**C/O COREEN HUBER
1370 W. HWY 64, UNIT G
MURPHY, NC 28906**New Principal Place of Business:****Current Mailing Address:**C/O COREEN HUBER
1370 W. HWY 64, UNIT G
MURPHY, NC 28906**New Mailing Address:****FEI Number:** 20-3281499**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HUBER, COREEN D
2268 WINSLOW CIRCLE
CASSELBERRY, FL 32707 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

MANAGING MEMBERS/MANAGERS:Title: MGR () Delete
Name: HUBER, COREEN D
Address: 1370 W. HWY 64, UNIT G
City-St-Zip: MURPHY, NC 28906Title: MGR () Delete
Name: HUBER, CARL L II
Address: 1370 W. HWY 64, UNIT G
City-St-Zip: MURPHY, NC 28906**ADDITIONS/CHANGES:**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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: COREEN D HUBER

MGR

09/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date