

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L52637

Entity Name: L.C. SALES & MARKETING, INC.

FILED
Mar 30, 2004
Secretary of State

Current Principal Place of Business:

664 OAK HOLLOW WAY
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

132 KENTUCKY BLUE CIRCLE
APOPKA, FL 32712

Current Mailing Address:

664 OAK HOLLOW WAY
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

132 KENTUCKY BLUE CIRCLE
APOPKA, FL 32712

FEI Number: 59-2994524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COONS, LISA K.
664 OAK HOLLOW WAY
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

COONS, LISA K.
132 KENTUCKY BLUE CIRCLE
APOPKA, FL 32712 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:

03/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COONS, LISA K.,
Address: 664 OAK HOLLOW WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COONS, LISA K.,
Address: 132 KENTUCKY BLUE CIRCLE
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LISA K COONS

D

03/30/2004

Electronic Signature of Signing Officer or Director

Date