

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000724

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: LPALF, INC.

## Current Principal Place of Business:

799 OVERLOOK DRIVE  
WINTER HAVEN, FL 33884

## New Principal Place of Business:

3391 CYPRESS GARDENS RD.  
WINTER HAVEN, FL 33884

## Current Mailing Address:

799 OVERLOOK DRIVE  
WINTER HAVEN, FL 33884

## New Mailing Address:

3391 CYPRESS GARDENS RD.  
WINTER HAVEN, FL 33884

FEI Number: 20-0823064

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

F & L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SMITH, RON  
Address: 799 OVERLOOK DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete  
Name: BUTLER, CAROL  
Address: 799 OVERLOOK DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: ST ( ) Delete  
Name: BUTLER, J. FRED  
Address: 799 OVERLOOK DRIVE  
City-St-Zip: WINTER HAVEN, FL 33884

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITH, RON  
Address: 3391 CYPRESS GARDENS RD.  
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP (X) Change ( ) Addition  
Name: BUTLER, CAROL  
Address: 3391 CYPRESS GARDENS RD.  
City-St-Zip: WINTER HAVEN, FL 33884

Title: ST (X) Change ( ) Addition  
Name: BUTLER, J. FRED  
Address: 3391 CYPRESS GARDENS RD.  
City-St-Zip: WINTER HAVEN, FL 33884

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A. MCCOY

M

01/29/2009

Electronic Signature of Signing Officer or Director

Date