

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007545

Entity Name: LAMBSTV.COM, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

1316 NANCESOWEE AVENUE
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

1316 NANCESOWEE AVENUE
SEBRING, FL 33870

New Mailing Address:

FEI Number: 20-5263515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTT, JIM
9301M ORANGE BLOSSOM BLVD. S
SEBRING, FL 33875 US

Name and Address of New Registered Agent:

BUTT, JIM
122 SUNBIRD SQUARE
SEBRING, FL 33872 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:

04/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: HARDY, ELBERT
Address: 1316 NANCESOWEE AVENUE
City-St-Zip: SEBRING, FL 33870

Title: DVPT (X) Delete
Name: WARGO, MAGDALEN
Address: 1316 NANCESOWEE AVENUE
City-St-Zip: SEBRING, FL 33870

Title: DGM () Delete
Name: BUTT, JIM
Address: 9301 ORANGE BLOSSOM BLVD S
City-St-Zip: SEBRING, FL 33875

Title: M () Delete
Name: WARRINGTON, BOB
Address: 4306 9TH TEE COURT
City-St-Zip: SEBRING, FL 33872

Title: M () Delete
Name: POORE, PAUL
Address: 1618 MARIGOLD AVE
City-St-Zip: SEBRING, FL 33875

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DGM (X) Change () Addition
Name: BUTT, JIM
Address: 122 SUNBIRD SQUARE
City-St-Zip: SEBRING, FL 33872

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVPT (X) Change () Addition
Name: POORE, PAUL
Address: 1618 MARIGOLD AVE
City-St-Zip: SEBRING, FL 33875

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: ELBERT HARDY

DPS

04/30/2007

Electronic Signature of Signing Officer or Director

Date