

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000094137

Entity Name: LNC MANAGEMENT, INC.

FILED
Jan 12, 2004
Secretary of State

Current Principal Place of Business:

3175 S. CONGRESS AVENUE
SUITE 204
PALM SPRINGS, FL 33461

New Principal Place of Business:

Current Mailing Address:

3175 S. CONGRESS AVENUE
SUITE 204
PALM SPRINGS, FL 33461

New Mailing Address:

FEI Number: 65-1045917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CASTILLO, LUCY N
9761 MAJESTIC WAY
BOYNTON BEACH, FL 33437 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CASTILLO-LAMBOURG, SYLVIA L
Address: 9761 MAJESTIC WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VT () Delete
Name: CASTILLO, LUCY N
Address: 9761 MAJESTIC WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S () Delete
Name: CASTILLO, BORIS M
Address: P O BOX 741760
City-St-Zip: BOYNTON BEACH, FL 334371768

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CASTILLO-LAMBOURG, SYLVIA L
Address: 9321 WATERCOURSE WAY
City-St-Zip: BOYNTON BEACH, FL 33437

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

Title: S (X) Change () Addition
Name: CASTILLO, BORIS M
Address: 11728 WILSHIRE BLVD; SUITE B-512
City-St-Zip: LOS ANGELES, CA 90025

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: LUCY N. CASTILLO

VT

01/12/2004

Electronic Signature of Signing Officer or Director

Date