2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000014246

Entity Name: L P GROUP, INC.

FILED Jan 08, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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5405 TAYLOR ROAD STE 7 NAPLES, FL 34109

New Mailing Address: Current Mailing Address:

5405 TAYLOR ROAD STE 7 NAPLES, FL 34109

FEI Number: 65-1076699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIRETTE, TIMOTHY J MUCHA, MICHAEL 5405 TAYLOR ROAD, SUITE 7 5405 TAYLOR ROAD, SUITE 7 NAPLES, FL 34109 NAPLES, FL 34109

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: MICHAEL MUCHA 01/08/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPSD () Delete Title: (X) Change () Addition PORTER, GEORGE PORTER, GEORGE Name: Name: 2240 14TH STREET NORTH 2240 14TH STREET NORTH Address: Address: City-St-Zip:

NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103 US

Title: PD Title: PRES (X) Change () Addition () Delete Name: MUCHA, MICHAEL Name: MUCHA, MICHAEL 9211 PITTS BUGH BLVD. 9211 PITTS BUGH BLVD. Address: Address: FORT MYERS, FL 33912 FORT MYERS, FL 33912 US City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete S/T

Name: LIRETTE, TIMOTHY J Name: 3007 70TH STREET SW Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34105 US

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: MICHAEL MUCHA **PRES** 01/08/2004