

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000026581

FILED
Oct 11, 2005
Secretary of State

Entity Name: L & M ENTERPRISES OF SOUTHWEST FLORIDA INC.

Current Principal Place of Business:

702 LONG LINES LN
LEHIGH ACRES, FL 33936

New Principal Place of Business:

Current Mailing Address:

930 SHALIMAR DRIVE SW
LABELLE, FL 33935

New Mailing Address:

680 SHALIMAR DRIVE SW
LABELLE, FL 33935

FEI Number: 90-0015719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDS, MICHAEL SHANE
930 SHALIMAR DR SW
LABELLE, FL 33935 US

Name and Address of New Registered Agent:

SANDS, MICHAEL SHANE
680 SHALIMAR DR SW
LABELLE, FL 33935 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: MICHAEL SHANE SANDS

10/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANDS, MICHAEL SHANE
Address: 930 SHALIMAR DR SW
City-St-Zip: LABELLE, FL 33935

Title: VSTD () Delete
Name: INGRAM, BRUCE B III
Address: 702 LONG LINES LN
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SANDS, MICHAEL SHANE
Address: 680 SHALIMAR DR SW
City-St-Zip: LABELLE, FL 33935

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

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 SHANE SANDS

PD

10/11/2005

Electronic Signature of Signing Officer or Director

Date