

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000127116

Entity Name: LIGFMP, INC.

**FILED**  
**Feb 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3500 BEACHWOOD COURT  
# 102  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

3500 BEACHWOOD COURT  
# 102  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 03-0497077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PINCOMB, MYRON W  
3556 HIGHLAND GLEN WAY WEST  
JACKSONVILLE, FL 32224 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: D  
Name: PINCOMB, MYRON W  
Address: 3556 HIGHLAND GLEN WAY W  
City-St-Zip: JACKSONVILLE, FL 32224

I hereby 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 all other like empowered.

SIGNATURE: MYRON W. PINCOMB

D

02/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date