

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134161

Entity Name: LGM INTERNATIONAL, INC.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

3030 VENTURE LN, SUITE 106
MELBOURNE, FL 32934

New Principal Place of Business:

Current Mailing Address:

3030 VENTURE LN, SUITE 106
MELBOURNE, FL 32934

New Mailing Address:

FEI Number: 13-4227261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LENTZ, RONALD D
2555 KEY LARGO LANE
FT LAUDERDALE, FL 33312 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: PD () Delete
Name: LENTZ, RONALD D
Address: 2555 KEY LARGO LANE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: SVTD () Delete
Name: GIBBONS, DAVID
Address: 112 LOWER GLENCOE RD.
City-St-Zip: SPARKS GLENCOE, MD 21152

Title: VPD (X) Delete
Name: MCMCNAMIN, JIM
Address: 9840 TERRACE LAKE PT
City-St-Zip: ROSWELL, GA 30076

Title: SHD () Delete
Name: GEYER, JAMES DR
Address: 3511 WALDRON DR.
City-St-Zip: CHATTANOOGA, TN 37408

Title: SD () Delete
Name: FRANKS, ROBERT
Address: 2545 KEY LARGO LN
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD () Delete
Name: BARIBAUT, JR., LEWIS
Address: 361 NEW LONDON TURNPIKE
City-St-Zip: GLASTONBURY, CN 06033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD D LENTZ

PD

01/19/2009

Electronic Signature of Signing Officer or Director

_____ Date