

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000015097

FILED
Dec 06, 2006
Secretary of State**Entity Name:** LKCS ENTERPRISES, INC.**Current Principal Place of Business:**2439 AQUATIC DRIVE
ORLANDO, FL 32804**New Principal Place of Business:**4308 MONTANO AVE
SPRING HILL, FL 34609**Current Mailing Address:**2439 AQUATIC DRIVE
ORLANDO, FL 32804**New Mailing Address:**4308 MONTANO AVE
SPRING HILL, FL 34609**FEI Number:** 59-3766675**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KLUG'E, LARRY R
2439 AQUATIC DRIVE
ORLANDO, FL 32804 US**Name and Address of New Registered Agent:**KLUG'E, LARRY R
4308 MONTANO AVE
SPRING HILL, FL 34609 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:

Electronic Signature of Registered Agent

12/06/2006

Date**OFFICERS AND DIRECTORS:****Title:** CEO () Delete
Name: KLUG'E, LARRY R
Address: 2439 AQUATIC DRIVE
City-St-Zip: ORLANDO, FL 32804**Title:** P () Delete
Name: DICKINSON, STEVEN
Address: 2439 AQUATIC DR
City-St-Zip: ORLANDO, FL 32804**Title:** VP (X) Delete
Name: SMITH, JASON
Address: 1830 TALCO TERR
City-St-Zip: DELTONA, FL 32738**Title:** S (X) Delete
Name: DAVIS, LEONA
Address: 2439 AQUATIC DR
City-St-Zip: ORLANDO, FL 32804**Title:** T (X) Delete
Name: BECHERER, JAMES
Address: 2 SOUTH 53RD STREET
City-St-Zip: BELLEVILLE, IL 62226**Title:** D (X) Delete
Name: KLUGE, JIM
Address: 6240 LAKE AHMEREK RD
City-St-Zip: IRON RIVER, WI 54847**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CEO (X) Change () Addition
Name: KLUG'E, LARRY R
Address: 4308 MONTANO AVE
City-St-Zip: SPRING HILL, FL 34609**Title:** P (X) Change () Addition
Name: DICKINSON, STEVEN
Address: 4308 MONTANO AVE
City-St-Zip: SPRING HILL, FL 34609**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
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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 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: LARRY KLUG'E

Electronic Signature of Signing Officer or Director

CEO

12/06/2006

Date