## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015813

Entity Name: LCL TEAM, INCORPORATED

FILED Mar 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

947 NW 31ST AVE 947 NW 31ST AVE

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 US

**Current Mailing Address: New Mailing Address:** 

947 NW 31ST AVE 947 NW 31ST AVE

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 US

FEI Number: 68-0540880 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LINDHOLM, LEIF K LINDHOLM, LEIF K 8285 THAMES BLVD 2655 NW 29TH DR

BOCA RATON, FL 33433 US

BOCA RATON, FL 33433 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: 03/30/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition LINDHOLM, LEIF K LINDHOLM, LEIF K Name: Name:

8285 THAMES BLVD # C 2655 NW 29TH DR Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433 US

VPD Title: VPD (X) Change ( ) Addition Title: ( ) Delete

Name: LINDHOLM, LEIF K Name: LINDHOLM, LEIF K 8285 THAMES BLVD 2655 NW 29TH DR Address: Address:

BOCA RATON, FL 33433 US BOCA RATON, FL 33433 US City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title:

LINDHOLM, LEIF K LINDHOLM, LEIF K Name: Name: 8285 THAMES BLVD 2655 NW 29TH DR Address: Address:

City-St-Zip: BOCA RATON, FL 33433 US City-St-Zip: BOCA RATON, FL 33433 US

Title: ( ) Delete Title: (X) Change ( ) Addition

LINDHOLM, LEIF K LINDHOLM, LEIF K Name: Name: Address: 8285 THAMES BLVD Address: 2655 NW 29TH DR

City-St-Zip: BOCA RATON, FL 33433 US City-St-Zip: BOCA RATON, FL 33433 US

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: LEIF K LINDHOLM PD 03/30/2009