


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000035751		
1. Entity Name LGZ ENTERPRISE, INC.		
Principal Place of Business 509 MIRASOL CIRCLE SUITE 105 CELEBRATION, FL 34747 US		Mailing Address 509 MIRASOL CIRCLE SUITE 105 CELEBRATION, FL 34747 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MOORE, JANET C 509 MIRASOL CIRCLE SUITE 105 CELEBRATION, FL 34747		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	P	
NAME	MOORE, LARRY T	
STREET ADDRESS	509 MIRASOL CIRCLE, SUITE 105	
CITY- ST- ZIP	CELEBRATION, FL 34747	
TITLE	VP	
NAME	ZIEMBA, RONALD S	
STREET ADDRESS	612 WISTERIA LANE	
CITY- ST- ZIP	CELEBRATION, FL 34747	
TITLE	TD	
NAME	MOORE, JANET C	
STREET ADDRESS	509 MIRASOL CIRCLE, SUITE 105	
CITY- ST- ZIP	CELEBRATION, FL 34747	
TITLE	S	
NAME	ZIEMBA, REBECCA L	
STREET ADDRESS	612 WISTERIA LANE	
CITY- ST- ZIP	CELEBRATION, FL 34747	
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Janet C. Moore</u> Janet C. Moore 4-19-06 321-939-1286		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



04182006 No Chg-P CR2E034 (11/05)

4. FEI Number 83-0351854	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

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05/08/06-80041-011 158.75

DO NOT WRITE
IN THIS SPACE