## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000076859

Entity Name: LPM ENTERPRISES OF JAX, INC.

FILED Jan 29, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

3617 CROWN POINT ROAD STE 2 4251 TIMBERLAKE DR N. JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

3617 CROWN POINT ROAD STE 2 4251 TIMBERLAKE DRIVE N. JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257

FEI Number: 13-4258504 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GREEN, KEVIN

3617 CROWN POINT ROAD STE 2

JACKSONVILLE, FL 32257 US

LANCASTER, SCOTT

4251 TIMBERLAKE DR N.

JACKSONVILLE, FL 32257 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: SCOTT LANCASTER 01/29/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: D ( ) Delete Title: P (X) Change ( ) Addition Name: LANCASTER, SCOTT Name: LANCASTER, SCOTT

 Name:
 LANCASTER, SCOTT
 Name:
 LANCASTER, SCOTT

 Address:
 P O BOX 24668
 Address:
 4251 TIMBERLAKE DRIVE N.

 City-St-Zip:
 JACKSONVILLE, FL 32241
 City-St-Zip:
 JACKSONVILLE, FL 32257

Title: D ( ) Delete Title: VP (X) Change ( ) Addition Name: LANCASTER, KELLY Name: LANCASTER, KELLY

Address: P O BOX 24668 Address: 4251 TIMBERLAKE DR N.
City-St-Zip: JACKSONVILLE, FL 32241 City-St-Zip: JACKSONVILLE, FL 32257

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: SCOTT LANCASTER PRES 01/29/2007