2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134177

Jan 03, 2005 Secretary of State

FILED

Entity Name: LINDSEY & MACKE BINDERY & PRINTING EQUIPMENT, INC.

Current Principal Place of Business: New Principal Place of Business: 11626 PROSPEROUS DR. ODESSA, FL 33556 **Current Mailing Address: New Mailing Address:** 11626 PROSPEROUS DR. ODESSA, FL 33556 FEI Number: 76-0745724 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: L & M EQUIPMENT 11626 PROSPEROUS DR. ODESSA, FL 33556 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MACKE, THOMAS P Name: Name: 1309 CATALINA ROAD. E. Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LINDSEY, EDGAR LEE JR. Name: 4931 FORT PECK ROAD Address: Address: NEW PORT RICHEY, FL 34655 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition KISER, RONALD Name: Name: 6126 SEASIDE DR. Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: Title: () Delete Title: (X) Change () Addition HYLTON, SHEAN W HYLTON, SHEAN W Name: Name: Address: 2008 GOLDDUST CT. Address: 2008 GOLDDUST CT. City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: TRINITY, FL 34656 Title: Title: (X) Change () Addition () Delete MCLAREN, THOMAS A MCLAREN, THOMAS A Name: Name: 1211 LORETTO CIR. Address: 2428 BRINLEY DRIVE Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: TRINITY, FL 34656

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 L KISER S 01/03/2005