

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147464

Entity Name: LCP MACHINE, INC.

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

515 NINTH STREET
BUNNELL, FL 32110 US

New Principal Place of Business:

Current Mailing Address:

515 NINTH STREET
BUNNELL, FL 32110 US

New Mailing Address:

FEI Number: 51-0490255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFFERTY, MICHAEL
515 NINTH STREET
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

LAFFERTY, GWENDOLYN
515 NINTH STREET
BUNNELL, FL 32110 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: GWENDOLYN LAFFERTY

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAFFERTY, MIKE
Address: 1096 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174

Title: STD () Delete
Name: LAFFERTY, EDYE
Address: 1096 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: LAFFERTY, EDWARD
Address: 1096 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAFFERTY, MIKE
Address: 515 NINTH STREET
City-St-Zip: BUNNELL, FL 32110

Title: D (X) Change () Addition
Name: LAFFERTY, EDYE
Address: 515 NINTH STREET
City-St-Zip: BUNNELL, FL 32110

Title: VD (X) Change () Addition
Name: LAFFERTY, EDWARD
Address: 515 NINTH STREET
City-St-Zip: BUNNELL, FL 32110

Title: CFO () Change (X) Addition
Name: LAFFERTY, GWENDOLYN
Address: 515 NINTH STREET
City-St-Zip: BUNNELL, FL 32110

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: GWENDOLYN LAFFERTY

CFO

03/09/2009

Electronic Signature of Signing Officer or Director

Date