

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132466

Entity Name: LMC ASSOCIATES INC.

FILED
Aug 30, 2008
Secretary of State

Current Principal Place of Business:

1025 S.E. HOLBROOK COURT
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

159 SW SOUTH DANVILLE CIRCLE
PORT ST. LUCIE, FL 34953

Current Mailing Address:

1025 S.E. HOLBROOK COURT
PORT ST. LUCIE, FL 34952

New Mailing Address:

159 SW SOUTH DANVILLE CIRCLE
PORT ST. LUCIE, FL 34953

FEI Number: 83-0391425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, MIKE
1025 S.E. HOLBROOK COURT
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

WILLIAMS, MIKE
159 SW SOUTH DANVILLE CIRCLE
PORT ST. LUCIE, FL 34953 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:

08/30/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: WILLIAMS, MIKE
Address: 159 S.W. DANVILLE CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP () Delete
Name: BUTTON, CHARLES
Address: 855 SUNSET DRIVE
City-St-Zip: MELBOURNE, FL 24935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WILLIAMS, MIKE
Address: 159 SW SOUTH DANVILLE CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MIKE WILLIAMS

PRES

08/30/2008

Electronic Signature of Signing Officer or Director

Date