

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165216

Entity Name: LC PRODUCTIONS, INC.

FILED
Apr 06, 2007
Secretary of State

Current Principal Place of Business:

4271 BONITA BEACH ROAD
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

4271 BONITA BEACH ROAD
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 43-2069417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, ALEXANDER L ESQ
9853 N TAMIAMI TRL #220
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SMITH, MICHAEL
Address: 9600 VICTORIA LN #208
City-St-Zip: NAPLES, FL 34109

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, MICHAEL S PRESIDE
Address: 9600 VICTORIA LN #208
City-St-Zip: NAPLES, FL 34109 US

Title: O () Change (X) Addition
Name: CHAREST, ROBERT R SECRETA
Address: 505 BROAD AVE.
City-St-Zip: NAPLES, FL 34102 US

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: MICHAEL SMITH

D

04/06/2007

Electronic Signature of Signing Officer or Director

_____ Date