2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2009
Secretary of State

DOCUMENT# P05000009472

Entity Name: LCF ENTERPRISE, INC.

Current Principal Place of Business:

6571 MAGEE CT
ORLANDO, FL 32818

New Principal Place of Business:

338 HAWTHORNE HILLS PLACE
102
ORLANDO, FL 32835

Current Mailing Address:

P.O.BOX 682397
ORLANDO, FL 32868 US

New Mailing Address:

FEI Number: 20-2187890 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOSTER, LESMOND
6571 MAGEE CT
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

FOSTER, LESMOND
338 HAWTHORNE HILLS PLACE
102
ORLANDO, FL 32835 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: 05/30/2009
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: DP ( ) Delete
Name: FOSTER, LESMOND
Address: 6571 MAGEE CT
City-St-Zip: ORLANDO, FL 32818

Title: DV ( ) Delete
Name: FOSTER, CAROLYN
Address: 6571 MAGEE CT
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: FOSTER, LESMOND
Address: 338 HAWTHORNE HILLS PLACE
City-St-Zip: ORLANDO, FL 32835

Title: DV (X) Change ( ) Addition
Name: FOSTER, CAROLYN
Address: 338 HAWTHORNE HILLS PLACE
City-St-Zip: ORLANDO, FL 32835

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: LESMOND FOSTER PRES 05/30/2009
Electronic Signature of Signing Officer or Director — Date