

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031708

FILED
Feb 02, 2009
Secretary of State

Entity Name: L & L BUILDING MAINTENANCE, INC.

Current Principal Place of Business:

9573 GROVELAND STREET
SEMINOLE, FL 337722942

New Principal Place of Business:

Current Mailing Address:

9573 GROVELAND STREET
SEMINOLE, FL 337722942

New Mailing Address:

FEI Number: 59-2999345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PABST, KELVIN L.
9573 GROVELAND STREET
SEMINOLE, FL 337722942 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: PSTD () Delete
Name: PABST, KELVIN L
Address: 9573 GROVELAND ST
City-St-Zip: SEMINOLE, FL 337722942

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PABST, KELVIN L
Address: 9573 GROVELAND ST
City-St-Zip: SEMINOLE, FL 337722942 US

Title: VP () Change (X) Addition
Name: PABST, JOYCE
Address: 9573 GROVELAND ST
City-St-Zip: SEMINOLE, FL 337722942 US

Title: VP () Change (X) Addition
Name: PABST, KRISTEN
Address: 9573 GROVELAND ST
City-St-Zip: SEMINOLE, FL 337722942 US

Title: T () Change (X) Addition
Name: PABST, LAURA
Address: 9573 GROVELAND ST
City-St-Zip: SEMINOLE, FL 337722942 US

Title: S () Change (X) Addition
Name: PABST, JARED
Address: 9573 GROVELAND ST
City-St-Zip: SEMINOLE, FL 337722942 US

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: KELVIN PABST

P

02/02/2009

Electronic Signature of Signing Officer or Director

Date