

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153630

Entity Name: J. LOMBARDI ENTERPRISES, INC.

FILED  
Mar 17, 2007  
Secretary of State

## Current Principal Place of Business:

7515 WINGING WAY  
TAMPA, FL 33615

## New Principal Place of Business:

RT 1 BOX 98 LOT 16  
LAKELAND, GA 31635

## Current Mailing Address:

7 DIDDELL RD  
WAPPINGERS FALLS, NY 12590

## New Mailing Address:

RT 1 BOX 98 LOT 16  
LAKELAND, GA 31635

FEI Number: 20-3810217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOMBARDI, JOANNE  
7515 WINGING WAY  
TAMPA, FL 33615 US

## Name and Address of New Registered Agent:

LOMBARDI, JOANNE  
RT 1 BOX 98 LOT 16  
LAKELAND, FL 31635 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: JOANNE LOMBARDI

03/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOMBARDI, JOANNE  
Address: 7 DIDDELL RD  
City-St-Zip: WAPPINGERS FALLS, NY 12950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LOMBARDI, JOANNE  
Address: RT 1 BOX 98 LOT 16  
City-St-Zip: LAKELAND, GA 31635

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: JOANNE LOMBARDI

P

03/17/2007

Electronic Signature of Signing Officer or Director

Date