

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000158918

Entity Name: LE GENDRE ENTERPRISE, INC.

FILED
Feb 21, 2008
Secretary of State

Current Principal Place of Business:

5345 WILLOW OAK DR
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

5345 WILLOW OAK DR
PACE, FL 32571

New Mailing Address:

4201 SW WINSLOW
PORT SAINT LUCIE, FL 34953

FEI Number: 42-1686122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LE GENDRE, SCOTT L
5345 WILLOW OAK DR
PACE, FL 32571 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: P () Delete
Name: LE GENDRE, SCOTT L
Address: 5345 WILLOW OAK DR
City-St-Zip: PACE, FL 32571

Title: VP () Delete
Name: SUMBLIN, JAMIE E
Address: 5345 WILLOW OAK DR
City-St-Zip: PACE, FL 32571

Title: TRE () Delete
Name: LE GENDRE, SCOTT L
Address: 5345 WILLOW OAK DR
City-St-Zip: PACE, FL 32571

Title: DIR () Delete
Name: LE GENDRE, SCOTT L
Address: 5345 WILLOW OAK DR
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: LE GENDRE, SCOTT L VP
Address: 5345 WILLOW OAK DR
City-St-Zip: PACE, FL 32571

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

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: SCOTT LE GENDRE

PRES

02/21/2008

Electronic Signature of Signing Officer or Director

Date