

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000166612

FILED
Feb 04, 2007
Secretary of State

Entity Name: LARRY SANDS ASSOCIATES, INC.

Current Principal Place of Business:

5651 COUNTY ROAD 352
KEYSTONE HEIGHTS, FL 32656 US

New Principal Place of Business:

Current Mailing Address:

5651 COUNTY ROAD 352
KEYSTONE HEIGHTS, FL 32656 US

New Mailing Address:

FEI Number: 51-0562222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDS, LARRY
5651 COUNTY ROAD 352
KEYSTONE HEIGHTS, FL 32656 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: SANDS, LARRY
Address: 5651 COUNTY ROAD 352
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: VP () Delete
Name: SANDS, LARRY
Address: 5651 COUNTY ROAD 352
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: S/T () Delete
Name: SANDS, LARRY
Address: 5651 COUNTY ROAD 352
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: LARRY SANDS

P

02/04/2007

Electronic Signature of Signing Officer or Director

Date