

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100868

FILED  
Jun 23, 2009  
Secretary of State

Entity Name: L & T SANDERS MANAGEMENT CORP.

**Current Principal Place of Business:**

2191 US HWY. 1  
TITUSVILLE, FL 32796

**New Principal Place of Business:**

**Current Mailing Address:**

2191 US HWY. 1  
TITUSVILLE, FL 32796

**New Mailing Address:**

FEI Number: 20-5349836

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANDERS, LOUIS  
2191 US HWY. 1  
TITUSVILLE, FL 32796 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

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: PD ( ) Delete  
Name: SANDERS, LOUIS  
Address: P. O. BOX 337  
City-St-Zip: SCOTTSMOOR, FL 32775

Title: VSTD ( ) Delete  
Name: SANDERS, TERESA  
Address: P. O. BOX 337  
City-St-Zip: SCOTTSMOOR, FL 32775

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: TERESA L SANDERS

D

06/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date