

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000079683

Entity Name: L & M PARTNERS, INC.

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

160 KRISTI DRIVE  
INDIAN HARBOUR BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

160 KRISTI DRIVE  
INDIAN HARBOUR BEACH, FL 32937 US

**New Mailing Address:**

FEI Number: 01-0962557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FINNEGAN, MICHAEL J  
160 KRISTI DRIVE  
INDIAN HARBOUR BEACH, FL 32937 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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: FINNEGAN, LAURIE A  
Address: 160 KRISTI DRIVE  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: COO  
Name: FINNEGAN, MICHAEL J  
Address: 160 KRISTI DRIVE  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL J. FINNEGAN

COO

01/17/2011

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

\_\_\_\_\_  
Date