

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000059966

Entity Name: LPF ENTERPRISES INC.

FILED  
Feb 01, 2012  
Secretary of State

**Current Principal Place of Business:**

23324 KEY LARGO LOOP  
LAND O LAKES, FL 34639 US

**New Principal Place of Business:**

8417 NORTHCLIFFE BLVD  
SPRING HILL, FL 34606 US

**Current Mailing Address:**

23324 KEY LARGO LOOP  
LAND O LAKES, FL 34639 US

**New Mailing Address:**

FEI Number: 35-2416613      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

FUCHECK, PAUL J  
23324 KEY LARGO LOOP  
LAND O LAKES, FL 34639 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: D  
Name: FUCHECK, PAUL J  
Address: 23324 KEY LARGO LOOP  
City-St-Zip: LAND O LAKES, FL 34639 US

Title: D  
Name: FUCHECK, LINDA M  
Address: 23324 KEY LARGO LOOP  
City-St-Zip: LAND O LAKES, FL 34639 US

Title: P  
Name: FUCHECK, LINDA M  
Address: 23324 KEY LARGO LOOP  
City-St-Zip: LAND O LAKES, FL 34639 US

Title: S  
Name: FUCHECK, PAUL J  
Address: 23324 KEY LARGO LOOP  
City-St-Zip: LAND O LAKES, FL 34639 US

Title: T  
Name: FUCHECK, PAUL J  
Address: 23324 KEY LARGO LOOP  
City-St-Zip: LAND O LAKES, FL 34639 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: PAUL J FUCHECK

D

02/01/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date