


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P33474 1. Entity Name LTM HOLDINGS, INC.	
---	---

Principal Place of Business 150 W. BRAMBLETON AVENUE NORWALK, VA 23510	Mailing Address 150 W. BRAMBLETON AVENUE NORWALK, VA 23510
--	--



01252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-1389333	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARRY, RICHARD F. III 150 W. BRAMBLETON AVE NORFOLK, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATTEN, FRANK 150 W BRAMBLETON AVE NORFOLK, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GOETZ, SUSAN 150 W. BRAMBLETON AVE. NORFOLK, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FRIDDELL, GUY R III 150 W. BRAMBLETON AVE NORFOLK, VA 23510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000821678
 02/19/08-80035-024 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan J. Goetz Susan Goetz 1/29/08 757-446-2013
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #