

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

03-12-2007 90376 026 \*\*\*150.00

**DOCUMENT # P93000081577**

1. Entity Name  
LADY CHRISTINE, INC.



Principal Place of Business Mailing Address  
191 NW MAGNOLIA LAKES BLVD 191 NW MAGNOLIA LAKES BLVD  
PORT SAINT LUCIE, FL 34986 US PORT SAINT LUCIE, FL 34986 US

**40034551**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address  
4537 RED BAY CIRCLE 4537 RED BAY CIRCLE  
Suite, Apt. #, etc. Suite, Apt. #, etc.

03062007 Chg-P CR2E034 (12/06)

City & State City & State  
JENSEN BEACH FL JENSEN BEACH FL  
Zip Country Zip Country  
34957 USA 34957 USA

4. FEI Number Applied For  
65-0449285 Not Applicable

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

**6. Name and Address of Current Registered Agent**

CUNNINGHAM, WILLIAM J JR  
191 MAGNOLIA LAKES BLVD  
PORT SAINT LUCIE, FL 34986

**7. Name and Address of New Registered Agent**

Name  
WILLIAM J. CUNNINGHAM JR  
Street Address (P.O. Box Number is not Acceptable)  
4537 RED BAY CIRCLE  
City JENSEN BEACH FL 34957

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 *William J. Cunningham Jr* WILLIAM J. CUNNINGHAM JR March 6, 2007  
(NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
P	CUNNINGHAM, WILLIAM J JR	191 MAGNOLIA LAKES BLVD	PORT SAINT LUCIE, FL 34986	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
P	WILLIAM J. CUNNINGHAM JR	4537 RED BAY CIRCLE	JENSEN BEACH FL 34957	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

*William J. Cunningham Jr* 03-06-07 772-682-4997  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #