2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000054055

1. Entity Name
LITTLE SABINE INVESTMENT GROUP, INC.

Principal Place of Business	Mailing Address
%COMFORT INN PENSACOLA BCH 40 FORT PICKENS RD PENSACOLA BEACH, FL 32561 US	%COMFORT INN PENSACOLA BCH 40 FORT PICKENS RD PENSACOLA BEACH, FL 32561 US

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03022005   No Chg-P   CR2E034 (10/03)

4. FEI Number 59-3270557	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

MCALPIN, RICHARD R.
25 WEST CEDAR ST.
SUITE 313
PENSACOLA, FL 32501

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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_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

U00000270622
03/21/05-80015-002 150.00

10.   OFFICERS AND DIRECTORS

TITLE	DP
NAME	MCALPIN, RICHARD R
STREET ADDRESS	25 WEST CEDAR ST. SUITE 313
CITY-ST-ZIP	PENSACOLA, FL 32501
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____   President   3/11/05   (850)432-1090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #