

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000087590

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: LOU ANNE PERRY, LMT, INC.

**Current Principal Place of Business:**

102 HANCHEY BLVD  
VENICE, FL 34292 US

**New Principal Place of Business:**

**Current Mailing Address:**

102 HANCHEY BLVD  
VENICE, FL 34292 US

**New Mailing Address:**

FEI Number: 59-3345778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERRY, LOU ANNE  
102 HANCHEY BLVD  
VENICE, FL 34292 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: PERRY, LOU ANNE  
Address: 102 HANCHEY BLVD  
City-St-Zip: VENICE, FL 34292

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LOU ANNE PERRY

PSTD

04/07/2009

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

\_\_\_\_\_  
Date