

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000034934

Entity Name: LBC PROFESSIONAL INC.

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

13700 SUTTON PARK DRIVE NORTH #535  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

13700 SUTTON PARK DRIVE NORTH #535  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 59-3380542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARTON, THOMAS L  
13700 SUTTON PARK DRIVE NORTH #535  
JACKSONVILLE, FL 32224 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: PD  
Name: BARTON, THOMAS L  
Address: 13700 SUTTON PARK DRIVE NORTH #535  
City-St-Zip: JACKSONVILLE, FL 32224

Title: SD  
Name: KOLODINSKY, BEVERLY B  
Address: 53 SOUTH NINE DRIVE  
City-St-Zip: PONTA VERDE BEACH, FL 32082

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: THOMAS L. BARTON

PRES

03/30/2011

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

\_\_\_\_\_  
Date