


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000104398	
1. Entity Name L & L MANAGEMENT AND CONSULTANTS, INC.	

Principal Place of Business 8473 BAY COLONY DR. NAPLES, FL 34108	Mailing Address 8473 BAY COLONY DR. NAPLES, FL 34108
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01302005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3481965	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LORENTZ, JOSEPH J 8473 BAY COLONY DR. NAPLES, FL 34108
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**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 Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when reinstating)	DATE
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**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE P	NAME LORENTZ, JOSEPH
STREET ADDRESS 8473 BAY COLONY DR.	CITY-ST-ZIP NAPLES, FL 34108
TITLE V	NAME LORENTZ, CATHERINE V
STREET ADDRESS 8473 BAY COLONY DR.	CITY-ST-ZIP NAPLES, FL 34108
TITLE S	NAME CLARK, SANDRA
STREET ADDRESS 19 SAVAGE RD., APT. D1	CITY-ST-ZIP DENVER, NJ 07834
TITLE T	NAME RUSSO, SUSAN
STREET ADDRESS 19 WINDING RIDGE	CITY-ST-ZIP OAKLAND, NJ 07436
TITLE NAME	STREET ADDRESS
CITY-ST-ZIP	
TITLE NAME	STREET ADDRESS
CITY-ST-ZIP	

U00000354225
05/03/05-80099-001 150.00

**DO NOT WRITE
IN THIS SPACE**

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: 	4/27/05	Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		