


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-11-2004 90036 030 ***150.00

DOCUMENT # P98000004131	
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1. Entity Name
LG CONSULTING, INC.

Principal Place of Business

1294 REGENCY PLACE
HEATHROW, FL 32746

Mailing Address

1294 REGENCY PLACE
HEATHROW, FL 32746

*Change
of
address*

66403451



2. Principal Place of Business

9826 Portside Terr.

3. Mailing Address

9826 Portside Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052004

Chg-P

CR2E034 (10/03)

City & State

Bradenton, FL 34212

City & State

Bradenton, FL

4. FEI Number

59-3491009

Applied For

Not Applicable

Zip

34212

Country

USA

Zip

34212

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRATSCH, LINDA L
1294 REGENCY PLACE
HEATHROW, FL 32746

9826 Portside Terr.
Bradenton, FL
34212

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Linda L. Gratsch

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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10.

OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	GRATSCH, LINDA L	
STREET ADDRESS	1294 REGENCY PL	
CITY-ST-ZIP	HEATHROW, FL 32746	
TITLE	V	<input type="checkbox"/> Delete
NAME	GRATSCH, WILLIAM R	
STREET ADDRESS	1294 REGENCY PL	
CITY-ST-ZIP	HEATHROW, FL 32746	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Linda L. Gratsch

2-23-04

Date

(941) 749-1452

Daytime Phone #