

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000077557

1. Entity Name
L.D.T. ENTERPRISES, INC.



Principal Place of Business
12960 METRO PKWY
FORT MYERS, FL 33912

Mailing Address
12960 METRO PKWY
FORT MYERS, FL 33966



03112008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0866135

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RANDOLPH, MICHAEL D
2235 FIRST STREET
FORT MYERS, FL 33905

**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 title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U00000928421
U5/21/08-80029-002 150.00

10. OFFICERS AND DIRECTORS

| | |
|-----------------|-------------------------|
| TITLE | D |
| NAME | TAYLOR, JOHN T |
| STREET ADDRESS | 931 S. TOWN & RIVER DR. |
| CITY - ST - ZIP | FORT MYERS, |
| TITLE | D |
| NAME | TAYLOR, JENNIFER H |
| STREET ADDRESS | 931 S. TOWN & RIVER DR. |
| CITY - ST - ZIP | FORT MYERS, |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN TAYLOR

4/23/08

Date

239-561-1199

Daytime Phone #