

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90154 003 ***150.00

DOCUMENT # P98000093629

1. Entity Name
LGF, INCORPORATED

Principal Place of Business
750 EAST SAMPLE ROAD #227
POMPANO BEACH FL 33064

Mailing Address
750 EAST SAMPLE ROAD #227
POMPANO BEACH FL 33064

2. Principal Place of Business
3997 NW 19 AVENUE
 Suite, Apt. #, etc.

3. Mailing Address
3997 NW 19 AVENUE
 Suite, Apt. #, etc.

City & State
OAKLAND PARK, FL

City & State
OAKLAND PARK, FL

4. FEI Number **65-0862049**

Applied For
 Not Applicable

Zip
33309

Country

Zip
33309

Country

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

6. Name and Address of Current Registered Agent

TWOHEY, CHRISTOPHER J
312 DENVER AVENUE
STUART FL 34994

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **DALTON, JOHN E JR.**
 STREET ADDRESS **3997 NW 19TH AVE**
 CITY-ST-ZIP **OAKLAND PARK FL 33309**

TITLE **V** ☐ Delete
 NAME **DALTON, TAMARA J**
 STREET ADDRESS **3997 NW 19TH AVE**
 CITY-ST-ZIP **OAKLAND PARK FL 33309**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOHN E. DALTON
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/2002 305-573-3845
 Date Daytime Phone #

CR2E034 (9/01)