



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90165 013 ***150.00

DOCUMENT # P99000083748 1. Entity Name LANCE MARKETING GROUP, INC.					
Principal Place of Business 800 W CYPRESS CREEK RD, SUITE 465 FORT LAUDERDALE, FL 33309			Mailing Address 800 W CYPRESS CREEK RD, SUITE 465 FORT LAUDERDALE, FL 33309		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 65-0951468 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				04192008 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent LEGAL, LARRY 800 W. CYPRESS CREEK RD. SUITE 470 FORT LAUDERDALE, FL 33309			7. Name and Address of New Registered Agent Name LEGAL, LARRY Street Address (P.O. Box Number is Not Acceptable) 800 W. CYPRESS CREEK RD., SUITE 465 City FORT LAUDERDALE, FL Zip Code 33309		
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 <u><i>Larry Legal</i></u> DATE <u>4.30.8</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST LEGAL, LARRY 800 W. CYPRESS CREEK RD., #470 FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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 <u><i>Larry Legal</i></u> LARRY LEGAL PRET DATE <u>4.30.8</u> DAYTIME PHONE # <u>954 493 8900</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					