200.6 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2006 8:00 am
Secretary of State
03-06-2006 90030 007 ***150.00

DOCUMENT # S 01354

1. Entity Name
LAJUF, INCORPORATED

DO NOT WRITE IN THIS SPACE

40025420

2. Principal Place of Business	3. Mailing Address	DO NOT WRITE IN THIS SPACE
29495 WILDLIFE LANE Suite, Apt. #, etc.	29495 WILDLIFE LANE Suite, Apt. #, etc.	
City & State: BROOKSVILLE, FL	City & State: BROOKSVILLE, FL	4. FEI Number: 59-3027793 ☐ Applied Fo ☐ Not Applic
Zip: 34602 Country: HERNANDO	Zip: 34602 Country: HERNANDO	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: LARRY J FANNIN

Street Address (P.O. Box Number is Not Acceptable): 29495 WILDLIFE LANE

City: BROOKSVILLE, FL Zip Code: 34602

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 accep the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LARRY J FANNIN
STREET ADDRESS	29495 WILDLIFE LANE
CITY-ST-ZIP	BROOKSVILLE, FL 34602
TITLE	D
NAME	JUDY FANNIN
STREET ADDRESS	29495 WILDLIFE LANE
CITY-ST-ZIP	BROOKSVILLE, FL 34602
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Larry J. Fannin 3/3/06 352-799-0509
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #