

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # S22429 1. Entity Name L.P.G.N.G. SERVICES, INC.																																																																																																																													
Principal Place of Business 1288 PRIMROSE LANE W.P.B. FL 33414			Mailing Address 1288 PRIMROSE LANE W.P.B. FL 33414																																																																																																																										
2. Principal Place of Business Suite, Apt. #, etc		3. Mailing Address Suite, Apt. #, etc																																																																																																																											
City & State		City & State		4. FEI Number 65-0234737 ☐ Applied For ☐ Not Applicable																																																																																																																									
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																									
6. Name and Address of Current Registered Agent RONDEAU, MICHAEL 1288 PRIMROSE LANE W.P.B. FL 33414				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 _____ Signature, typed or printed name of registered agent and title is applicable (NOTE: Registered Agent signature required when resigning) DATE _____																																																																																																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>RONDEAU, MICHAEL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1288 PRIMROSE LANE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>W.P.B. FL 33414</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>RONDEAU, ANNE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1288 PRIMROSE LANE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>W.P.B. FL 33414</td> <td></td> </tr> <tr> <td>TITLE</td> <td>T</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>RONDEAU, MICHAEL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1288 PRIMROSE LANE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>W.P.B. FL 33414</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">1100000449655</td> <td style="width: 10%; text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>03/09/06-80061-025 150.00</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	P	☐ Delete	NAME	RONDEAU, MICHAEL		STREET ADDRESS	1288 PRIMROSE LANE		CITY-ST-ZIP	W.P.B. FL 33414		TITLE	S	☐ Delete	NAME	RONDEAU, ANNE		STREET ADDRESS	1288 PRIMROSE LANE		CITY-ST-ZIP	W.P.B. FL 33414		TITLE	T	☐ Delete	NAME	RONDEAU, MICHAEL		STREET ADDRESS	1288 PRIMROSE LANE		CITY-ST-ZIP	W.P.B. FL 33414		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	1100000449655	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP	03/09/06-80061-025 150.00		TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Michael Rondeau <i>Michael Rondeau</i> 2/27/06 561-719-5347																																																																																																																													