2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # V29196

1. Entity Name

LORD CULTURAL RESOURCES PLANNING & MANAGEMENT INC.



Principal Place of Business

TALLAHASSEE, FL 32308

3375-G CAPITAL CIRCLE NE

Mailing Address

3375-G CAPITAL CIRCLE NE TALLAHASSEE, FL 32308

FILED Feb 12, 2004 8:00 am Secretary of State

02-12-2004 90005 037 ***158.75

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01162004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0329823

Applied For Not Applicable

5. Certificate of Status Desired _____

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMSON BROCK CHERRY & COMPANY 3375-G CAPITAL CIRCLE NE TALLAHASSEE, FL 32308

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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 it app	licable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTO	RS		* * *		La Lag Wester
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LORD, GAIL DEXTER 301 DAVENPORT RD. TORONTO, ON					
NAME STREET ADDRESS CITY-ST-ZIP	DVPS LORD, BARRY 301 DAVENPORT RD. TORONTO, ON					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP NICKS, JOHN 301 DAVENPORT RD. TORONTO, ON			DO	NOT WRITE	and the second s
NAME STREET ADDRESS CITY-ST-ZIP	STEPHEN MILLS BOT DAUGNPORT RD. TORONTO, ON	**************************************	. Harring and Market States of	· · · · · · · · · · · · · · · · · · ·	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

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 Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

416-920-9292



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 3, 2004

LORD CULTURAL RESOURCES PLANNING & MANAGEMENT INC. 3375-G CAPITAL CIRCLE NE TALLAHASSEE, FL 32308

SUBJECT: LORD CULTURAL RESOURCES PLANNING & MANAGEMENT

INC.

Ref. Number: V29196

We have received your document for LORD CULTURAL RESOURCES PLANNING & MANAGEMENT INC. and check(s) totaling \$158.75. However, your check(s) and document are being returned for the following:

The person that signed the reinstatement application is not listed as an officer/director of the corporation. Please list the person signing as an officer/director in the appropriate space or on an attachment with a street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 204A00007085