

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 26, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 702516</b> 1. Entity Name <b>LAFAYETTE ARMS INC</b>			
Principal Place of Business 2866 NE 30 ST FT. LAUDERDALE FL 33306		Mailing Address 2866 NE 30 ST FT. LAUDERDALE FL 33306	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/06)

4. FEI Number <b>59-0999437</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent <b>NORRIS, SANDRA</b> <b>2866 NE 30TH ST</b> <b>FT. LAUDERDALE FL 33306</b>				7. Name and Address of New Registered Agent			
Name				Street Address (P.O. Box Number is Not Acceptable)			
City				<b>FL</b>	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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	TD	<input type="checkbox"/> Delete	NAME	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
STREET ADDRESS	NORRIS, SANDRA	2866 NE 30ST	FT. LAUDERDALE FL	NAME	U00000647314 03/06/07-80067-012 61.25		
CITY-ST-ZIP	2866 NE 30ST	FT. LAUDERDALE FL	33306	STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL	33306	33306	CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> Delete	NAME	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
STREET ADDRESS	LESSLEU, EUGENE	2866 N E 30 ST	FORT LAUDERDALE FL 33306	NAME			
CITY-ST-ZIP	2866 N E 30 ST	FORT LAUDERDALE FL 33306	33306	STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	33306	33306	CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete	NAME	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
STREET ADDRESS	LING, DONALD	2866 NE 30TH ST	FT LAUDERDALE FL 33306	NAME			
CITY-ST-ZIP	2866 NE 30TH ST	FT LAUDERDALE FL 33306	33306	STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33306	33306	33306	CITY-ST-ZIP			
TITLE	SD	<input type="checkbox"/> Delete	NAME	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
STREET ADDRESS	GIERING, DICK	2866 NE 30TH ST.	FORT LAUDERDALE FL 33306	NAME			
CITY-ST-ZIP	2866 NE 30TH ST.	FORT LAUDERDALE FL 33306	33306	STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	33306	33306	CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete	NAME	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
STREET ADDRESS	DOANE, JIM	2866 NE 30TH ST	FORT LAUDERDALE FL 33306	NAME			
CITY-ST-ZIP	2866 NE 30TH ST	FORT LAUDERDALE FL 33306	33306	STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	33306	33306	CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	NAME	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
STREET ADDRESS				NAME			
CITY-ST-ZIP				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

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 617, 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:** Sandra Norris - Sandra Norris Date: Feb 19 07 Daytime Phone #: 954-568-3073