


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 8:00 am
Secretary of State

02-27-2008 90003 015 ****61.25

DOCUMENT # 702516

1. Entity Name
LAFAYETTE ARMS INC



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.

02212008 Chg-NP CR2E037 (12/06)

City & State
 City & State

Zip Country Zip Country

4. FEI Number
59-0999437

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

NORRIS, SANDRA
2866 NE 30TH ST
FT. LAUDERDALE, FL 33306

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

Filing Fee is \$61.25
Due by May 1, 2008

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> Delete
NAME	NORRIS, SANDRA	
STREET ADDRESS	2866 NE 30ST	
CITY-ST-ZIP	FT. LAUDERDALE, FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	LESSLEU, EUGENE	
STREET ADDRESS	2866 N E 30 ST	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33306	
TITLE	D	<input type="checkbox"/> Delete
NAME	LING, DONALD	
STREET ADDRESS	2866 NE 30TH ST	
CITY-ST-ZIP	FT LAUDERDALE, FL 33306	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	GIERING, DICK	
STREET ADDRESS	2866 NE 30TH ST.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33306	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOANE, JIM	
STREET ADDRESS	2866 NE 30TH ST	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33306	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Murphy, Stephen	
STREET ADDRESS	2866 n.e 30 st.	
CITY-ST-ZIP	Fort Lauderdale, FL 33306	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lessieu, Eugene	
STREET ADDRESS	2866 n.e 30 st.	
CITY-ST-ZIP	Fort Lauderdale, FL 33306	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Doane, Jim	
STREET ADDRESS	2866 n.e 30 st.	
CITY-ST-ZIP	Fort Lauderdale, FL 33306	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 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 2-28-08 954-568-3073
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #