

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002844

Entity Name: LHI INVERRARY CORP.

FILED  
Apr 26, 2007  
Secretary of State

## Current Principal Place of Business:

4512 N FLAGLER DR  
201  
W PALM BEACH, FL 33407

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 6848  
W PALM BEACH, FL 334056848

## New Mailing Address:

FEI Number: 65-1102725

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRISON GOLDEN, HILLARY ESQ  
4512 N FLAGLER DR., STE 201A  
WEST PALM BEACH, FL 33407 US

## Name and Address of New Registered Agent:

GULDEN, HILLARY H ESQ  
4512 N FLAGLER DR.  
201  
WEST PALM BEACH, FL 33407 US

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.

SIGNATURE: HILLARY H GULDEN

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MAY, MARK R  
Address: 4512 N FLAGLER DR STE 201  
City-St-Zip: W PALM BEACH, FL 33407

Title: TCFO ( ) Delete  
Name: COVE, MICHAEL L  
Address: 4512 N FLAGLER DR., STE 201  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VD ( ) Delete  
Name: KAROSAS, MICHAEL R  
Address: 4512 N FLAGLER DR STE 201  
City-St-Zip: W PALM BEACH, FL 33407

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: COVE, MICHAEL L  
Address: 4512 N FLAGLER DR., STE 201  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP (X) Change ( ) Addition  
Name: KAROSAS, MICHAEL R  
Address: 4512 N FLAGLER DR STE 201  
City-St-Zip: W PALM BEACH, FL 33407

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK R MAY

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date