


**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

**95 APR 14 AM 10:27**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Montvan  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P93000039861 (8)**  
1. Corporation Name  
**LOXHATCHEE TECHNICAL SERVICES, INC.**

Principal Place of Business      Mailing Address  
**979 "D" ROAD  
LOXHATCHEE FL 33470**      **979 "D" ROAD  
LOXHATCHEE FL 33470**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**06/03/1993**      **06/30/1994**

4. FEI Number      Applied For / Not Applicable  
**65-0421074**       Applied For /  Not Applicable

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

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

6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes       Yes /  No

2. Principal Place of Business      2a. Mailing Address

21. Suite, Apt. #, etc.      26. Suite, Apt. #, etc.

22. City & State      27. City & State

23. Zip      Country      28. Zip      Country

24.      25.      29.      30.

9. Name and Address of Current Registered Agent

**LURTZ, GERHARD  
979 "D" ROAD  
LOXHATCHEE FL 33470**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City      85. Zip Code

**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LURTZ, GERHARD</b>	1.2 NAME	
STREET ADDRESS	<b>979 "D" ROAD</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>LOXHATCHEE FL 33470</b>	1.4 CITY - ST - ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gerhard Lurtz*      10-11-95      407-798-9015  
GERHARD LURTZ      (Type Name)