

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000003823

FILED  
Jan 16, 2008  
Secretary of State

Entity Name: LINTON TRUSS CORPORATION

**Current Principal Place of Business:**

1455 SW 4TH AVENUE  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

1455 SW 4TH AVENUE  
DELRAY BEACH, FL 33444

**New Mailing Address:**

FEI Number: 65-0546481      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LAZAROW, SELDAN A  
7696 CEDARWOOD CIR.  
BOCA RATON, FL 334344249 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPCS ( ) Delete  
Name: LAZAROW, SELDAN A  
Address: 7696 CEDARWOOD CIR  
City-St-Zip: BOCA RATON, FL 334344249

Title: DVP ( ) Delete  
Name: NICKLIN, ROBERT B  
Address: 1455 SW 4TH AVE.  
City-St-Zip: DELRAY BEACH, FL 33444

Title: D ( ) Delete  
Name: FEINTUCK, NORMAN  
Address: 4751 BOCAIRE BOULEVARD  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete  
Name: RITTER, JOHN  
Address: C/O 100 PEARL STREET  
City-St-Zip: HARTFORD, CT 06103

Title: D ( ) Delete  
Name: COMEY, ROBERT A  
Address: C/O 101 SECOND STREET SE  
City-St-Zip: CEDAR RAPIDS, IA 52401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: SELDAN A. LAZAROW

CEO

01/16/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date