

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000565

Entity Name: LOOMIS, FARGO & CO.

FILED
Apr 04, 2005
Secretary of State

Current Principal Place of Business:

2500 CITY WEST BLVD
SUITE 900
HOUSTON, TX 77042 US

New Principal Place of Business:

Current Mailing Address:

4330 PARK TERRACE DRIVE
WESTLAKE VILLAGE, CA 91361 US

New Mailing Address:

FEI Number: 75-0117200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: THELIN, CLAES H
Address: 2500 CITY WEST BLVD., SUITE 900
City-St-Zip: DALLAS, TX 77042

Title: VPTS () Delete
Name: JEFFERIES, SHIRLEY R
Address: 2500 CITY WEST BLVD., SUITE 900
City-St-Zip: HOUSTON, TX 77042

Title: AS () Delete
Name: PARK, ALBERT Y
Address: 4330 PARK TERRACE DRIVE
City-St-Zip: WESTLAKE VILLAGE, CA 91361

Title: D () Delete
Name: BERGLUND, THOMAS
Address: 3 MAPLE WAY, FELTHAM
City-St-Zip: MIDDLESEX, UK TW13 7AW

Title: D () Delete
Name: WINBERG, HAKAN
Address: 3 MAPLE WAY, FELTHAM
City-St-Zip: MIDDLESEX, UK TW13 7AW

Title: D () Delete
Name: LONDON, FREDERICK W
Address: 4330 PARK TERRACE DRIVE
City-St-Zip: WESTLAKE VILLAGE, CA 91361

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THELIN, CLAES H
Address: 1291 BOSTON POST ROAD
City-St-Zip: MADISON, CT 06443

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 for the exemption stated in Section 119.07(3)(i), 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: ALBERT Y. PARK

AS

04/04/2005

Electronic Signature of Signing Officer or Director

Date