

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 188620

Entity Name: LOVELL, INC.

FILED
Feb 22, 2007
Secretary of State

Current Principal Place of Business:

840 N. E. 20TH AVENUE
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

840 N. E. 20TH AVENUE
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

FEI Number: 59-0776750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVELL, ROSE A.
840 N. E. 20TH AVENUE
FORT LAUDERDALE, FL 33304 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: CD () Delete
Name: LOVELL, R. O.,
Address: 840 N. E. 20TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: PSD () Delete
Name: LOVELL, ROSE A.
Address: 840 N. E. 20TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: AS () Delete
Name: LUPO, NORA ANN
Address: 840 N. E. 20TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: VDT () Delete
Name: LOVELL, HAROLD B
Address: 840 N. E. 20TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: AS (X) Change () Addition
Name: STUDDT, HARRIET E
Address: 840 N. E. 20TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

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

Title: AS () Change (X) Addition
Name: LOVELL, H B
Address: 840 NE 20TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33304 US

Title: AT () Change (X) Addition
Name: STUDDT, HARRIET E
Address: 840 NE 20TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33304

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: R O LOVELL

Electronic Signature of Signing Officer or Director

CD

02/22/2007

_____ Date