2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2005
Secretary of State

DOCUMENT# 333963

Entity Name: LOMA ALTA COMPANY INC

Current Principal Place of Business:

610 NORTH THIRD STREET
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

610 NORTH THIRD STREET
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-1217154 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAGIST, DAVID H
610 NORTH 3RD STREET
JACKSONVILLE BCH., FL 32250 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: HAGIST, DAVID,
Address: 1749 SEMINOLE RD.
City-St-Zip: ATLANTIC BCH,FL 00000,

Title: VD ( ) Delete
Name: HAGIST, CYNTHIA,
Address: 1749 SEMINOLE RD
City-St-Zip: ATLANTIC BCH, FL

Title: S ( ) Delete
Name: HAGIST, CHRISTOPHER
Address: 1763 PARK TERRACE EAST
City-St-Zip: ATLANTIC BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: HAGIST, CHRISTOPHER
Address: 2286 PEERLESS LANE W
City-St-Zip: JACKSONVILLE, FL 32246 US

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: DAVID HAGIST PD 03/06/2005

Electronic Signature of Signing Officer or Director — Date