

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 350285

FILED
Jan 23, 2007
Secretary of State

Entity Name: LOFFLER CORPORATION

Current Principal Place of Business:

629 NE 3RD STREET
DANIA, FL 33004 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 606
DANIA, FL 33004 US

New Mailing Address:

FEI Number: 59-1277404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYLE, VINCENT F
629 NE 3RD STREET
DANIA, FL 33004 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: DP () Delete
Name: PYLE, MARY E
Address: 629 NE 3RD STREET
City-St-Zip: DANIA, FL 33004

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PYLE, VINCENT F
Address: 629 NE 3RD STREET
City-St-Zip: DANIA, FL 33004

Title: VP () Change (X) Addition
Name: PYLE, MARY E
Address: 629 NE 3RD STREET
City-St-Zip: DANIA, FL 33004

Title: D () Change (X) Addition
Name: PYLE, VINCENT F
Address: 629 NE 3RD STREET
City-St-Zip: DANIA, FL 33004

Title: D () Change (X) Addition
Name: PYLE, MARY E
Address: 629 NE 3RD STREET
City-St-Zip: DANIA, FL 33004

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: VINCENT PYLE

PRES

01/23/2007

Electronic Signature of Signing Officer or Director

_____ Date