# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 17, 2005**
**Secretary of State**

DOCUMENT# 665221

**Entity Name:** TROUTMAN PROPERTIES, INC.

**Current Principal Place of Business:**

2750 N LAKE REEDY RD
C/O LUCY ANN G. COLLIER
FROSTPROOF, FL 33843

**New Principal Place of Business:**

**Current Mailing Address:**

2750 N LAKE REEDY RD
C/O LUCY ANN G. COLLIER
FROSTPROOF, FL 33843

**New Mailing Address:**

**FEI Number: 59-1983726** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

COLLIER, LUCY ANNE
2750 N LAKE REEDY RD
FROSTPROOF, FL 33843 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: PTD ( ) Delete
Name: COLLIER, LUCY ANNE,
Address: 2750 N LAKE REEDY RD
City-St-Zip: FROSTPROOF, FL 00000,

Title: ASD ( ) Delete
Name: MATTESON, CYNTHIA L.,
Address: 315 EAST SESSMONS ST.
City-St-Zip: LAKE WALES, FL 33853

Title: VPD ( ) Delete
Name: TROUTMAN, BAXTER G
Address: 318 KENDALL DR SE
City-St-Zip: WINTER HAVEN, FL

Title: S ( ) Delete
Name: MATTESON, BYRON G
Address: 315 EAST SESSOMS ST.
City-St-Zip: LAKE WALES, FL 33853

**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:

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: LUCY ANNE COLLIER MS. 03/17/2005

Electronic Signature of Signing Officer or Director — Date