2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 687241

FILED Apr 23, 2007 Secretary of State

Entity Name: LOCHRANE ENGINEERING INCORPORATE	D	
Current Principal Place of Business:	New Principal Place	of Business:
201 S. BUMBY AVE. ORLANDO, FL 32803		
Current Mailing Address:	New Mailing Address	: :
201 S. BUMBY AVE. ORLANDO, FL 32803		
FEI Number: 59-2036861 FEI Number Applied For () FEI N	Number Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:		f New Registered Agent:
LOCHRANE, THOMAS G 201 S BUMBY AVENUE ORLANDO, FL 32803 US		
The above named entity submits this statement for the purpose in the State of Florida.	e of changing its registered	d office or registered agent, or both,
SIGNATURE:		
Electronic Signature of Registered Agent		Date
Election Campaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:
Title: P () Delete	Title: P/D	(X) Change () Addition

Name:

Address:

City-St-Zip:

LOCHRANE, THOMAS G LOCHRANE, THOMAS G Name: Name: 1357 MIZELL AVENUE 1357 MIZELL AVENUE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

Title: () Delete Title: (X) Change () Addition Name:

LOCHRANE, ROBERT J LOCHRANE, ROBERT J Name: Address: 1609 EAGLE NEST CIRCLE Address: 1609 EAGLE NEST CIRCLE WINTER SPGS., FL 32708 WINTER SPGS., FL 32708 City-St-Zip: City-St-Zip:

() Delete Title: Title: AVP () Change () Addition

CAVALERE, MICHAEL J Name: 201 S BUMBY AVENUE Address: ORLANDO, FL 32803 City-St-Zip:

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: THOMAS G LOCHRANE Ρ 04/23/2007