

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004796

FILED
Feb 16, 2006
Secretary of State

Entity Name: TROYER CORP.

Current Principal Place of Business:

4753 OLDE PUMP STREET
WALNUT CREEK, OH 44687

New Principal Place of Business:

Current Mailing Address:

PO BOX 68
WALNUT CREEK, OH 44687

New Mailing Address:

FEI Number: 34-1954431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHLABACH, WILLARD
3713 BAHIA VISTA
SARASOTA, FL 34232 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: PCD () Delete
Name: TROYER, LEVI M
Address: 2685 WALNUT VIEW DR.
City-St-Zip: WALNUT CREEK, OH

Title: VD () Delete
Name: TROYER, LILLIS L
Address: 2685 WALNUT VIEW DR.
City-St-Zip: WALNUT CREEK, OH

Title: SD () Delete
Name: TROYER, DAVID D
Address: 4752 OLDE PUMP STREET
City-St-Zip: WALNUT CREEK, OH

Title: TD () Delete
Name: TROYER, CRAIG S
Address: PO BOX 22
City-St-Zip: WALNUT CREEK, OH

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 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: WILLARD SCHLABACH

MGR

02/16/2006

Electronic Signature of Signing Officer or Director

Date