

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004360

FILED  
Feb 13, 2008  
Secretary of State

Entity Name: LUCTOR INTERNATIONAL CORPORATION

**Current Principal Place of Business:**

6520 PINECASTLE BLVD.  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

6520 PINECASTLE BLVD.  
ORLANDO, FL 32809

**New Mailing Address:**

FEI Number: 94-2720262

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VAN DE VELDE, DAVID H  
6520 PINECASTLE BLVD.  
ORLANDO, FL 32809 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: P ( ) Delete  
Name: VAN DE VELDE, DAVID  
Address: 6520 PINECASTLE BLVD.  
City-St-Zip: ORLANDO, FL 328096681

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: S ( ) Change (X) Addition  
Name: VAN DE VELDE, SUZANNE  
Address: 6520 PINECASTLE BLVD  
City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information supplied with this filing does not qualify 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: DAVID VAN DE VELDE

P

02/13/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date