## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000001338

Entity Name: LUTZ ENVIRONMENTAL CO., INC.

FILED Jan 20, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	. 16TH STREE O BEACH, FL				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX 1247 LINDEN, NJ 07036			2351 N POWERLINE ROAD POMPANO BEACH, FL 33069		
FEI Number	: 22-3037610	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	JART H KE VISTA CIRC TON, FL 3349				
	e named entity : e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CHRM ( ) LUTZ, STUART 2300 N.W. 16T POMPANO BEA	H STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VCHM ( ) LUTZ, HENRY ( 2300 N.W. 16T POMPANO BE	H STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( ) LUTZ, STUART 2300 N.W. 16T POMPANO BE	H STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST ( ) LUTZ, HENRY ( 2300 N.W. 16T POMPANO BEA	H STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: STUART H LUTZ CHRM 01/20/2009