

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000779

FILED
Feb 14, 2008
Secretary of State

Entity Name: VAN CONVERSIONS OF LEHIGH VALLEY, INC.

Current Principal Place of Business:

925 S TROOPS RD
NORRISTOWN, PA 19403

New Principal Place of Business:

925 S TROOPER RD
NORRISTOWN, PA 19403

Current Mailing Address:

925 S TROOPS RD
NORRISTOWN, PA 19403

New Mailing Address:

925 S TROOPER RD
NORRISTOWN, PA 19403

FEI Number: 23-3090964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: DONOVAN, JACK
Address: 925 S TROOPS RD
City-St-Zip: NORRISTOWN, PA 19403

Title: VPST () Delete
Name: BLASER, WILLIAM
Address: 925 S TROOPS RD
City-St-Zip: NORRISTOWN, PA 19403

Title: D () Delete
Name: BLASER, WILLIAM
Address: 925 S TROOPS RD
City-St-Zip: NORRISTOWN, PA 19403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DONOVAN, JACK
Address: 925 S TROOPER RD
City-St-Zip: NORRISTOWN, PA 19403

Title: VP (X) Change () Addition
Name: BLASER, WILLIAM
Address: 925 S TROOPER RD
City-St-Zip: NORRISTOWN, PA 19403

Title: D (X) Change () Addition
Name: BLASER, WILLIAM
Address: 925 S TROOPER RD
City-St-Zip: NORRISTOWN, PA 19403

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: JACK DONOVAN

PRES

02/14/2008

Electronic Signature of Signing Officer or Director

Date