2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001537

Entity Name: HERBERT LUTZ AND CO., INC.

FILED Feb 23, 2007 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:				
POST OFFICE BOX 1247 LINDEN, NJ 07036				2020 CLINTON STREET LINDEN, NJ 07036				
Current Mailing Address:				New Mailing Address:				
POST OFFICE BOX 1247 LINDEN, NJ 07036				2020 CLINTON STREET LINDEN, NJ 07036				
FEI Number:	22-1617726	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certifica	ate of Status Desired (X)	
Name and	Address of Cu	Name and Address of New Registered Agent:						
LUTZ, STU. 2200 NW 1 POMPANO		LUTZ, HENRY J 1925 NW 18 STREET POMPANO BEACH, FL 33069 US						
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: HENRY J LUTZ					02/23/2007			
Electronic Signature of Registered Agent							Date	
Election Campaign Financing Trust Fund Contribution ().								
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () E LUTZ, RICHARD 2020 CLINTON S LINDEN, NJ 070			Title: Name: Address: City-St-Zip:	P LUTZ, HENR 2020 CLINTO LINDEN, NJ	Ý J ON STREET	() Addition	
Title: Name: Address: City-St-Zip:	VP ()E RANDOLPH, G D 2200 NW 17 ST POMPANO BCH,			Title: Name: Address: City-St-Zip:	VP RANDOLPH, 1925 NW 18 POMPANO B	G D ST	() Addition 33069 US	
Title: Name: Address: City-St-Zip:	TVP () E LUTZ, HENRY J 2020 CLINTON S LINDEN, NJ 070			Title: Name: Address: City-St-Zip:		()Change	() Addition	
Title: Name: Address: City-St-Zip:	VP S () E LUTZ, STUART H 2200 NW 17 STR POMPANO BEAC	REET		Title: Name: Address: City-St-Zip:	VP S RANDOLPH, 1925 NW 18 POMPANO B	STREET		
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	V MOORE, KE' 1925 NW 18 POMPANO B	VIN M STREET	(X) Addition	

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: GEORGE D RANDOLPH VP 02/23/2007