2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# J45772

Entity Name: LUMBRA, ROBINSON & ASSOCIATES, INC.

Current Principal Place of Business:

498 S LAKE DESTINY RD
ORLANDO, FL 32810 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 948173
MAITLAND, FL 327948173 US

New Mailing Address:

FEI Number: 59-2744756 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIMASI, JOHN L ESQ
LAW OFFICES OF JOHN C DIMASI PA
207 E LIVINGSTON ST
ORLANDO, FL 32801 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: ST ( ) Delete
Name: LUMBRA, SUSAN M,
Address: 2510 GRESHAM RD.
City-St-Zip: ORLANDO, FL 32807

Title: P ( ) Delete
Name: LUMBRA, JAMES R.,
Address: 2510 GRESHAM RD
City-St-Zip: ORLANDO, FL 32807

Title: VP ( ) Delete
Name: LUMBRA, JAMES R JR
Address: 3805 BOBOLINK AVE
City-St-Zip: ORLANDO, FL 32803

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LUMBRA, JAMES R SR
Address: 2510 GRESHAM RD.
City-St-Zip: ORLANDO, FL 32807

Title: ST (X) Change ( ) Addition
Name: LUMBRA, SUSAN M
Address: 2510 GRESHAM RD
City-St-Zip: ORLANDO, FL 32807

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

Title: VP ( ) Change (X) Addition
Name: MOENCH, CYNTHIA V
Address: 129 E HAMPTON WAY
City-St-Zip: JUPITER, FL 33458

Title: VP ( ) Change (X) Addition
Name: NOBLE, CHERYL A
Address: 4612 COURTNEY LEE CT
City-St-Zip: ORLANDO, FL 32812

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: SUSAN M LUMBRA ST 03/24/2009

Electronic Signature of Signing Officer or Director — Date