2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L28628

Entity Name: SCHACHTER-LANDSDOWNE, INC.

FILED Feb 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13305 PROVENCE DRIVE

PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

13305 PROVENCE DRIVE

PALM BEACH GARDENS, FL 33410

FEI Number: 65-0154971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHACHTER, FRANKLIN FRANKLIN, SCHACHTER PRES 13305 PROVENCE DRIVE 13305 PROVENCE DRIVE

PALM BEACH GARDENS, FL 33410 US PALM BEACH GARDENS, FL 33410 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: FRANKLIN SCHACHTER 02/13/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PRES (X) Change () Addition

Name: SCHACHTER, FRANKLIN, Name: SCHACHTER, FRANKLIN, Address: 13305 PROVENCE DR Address: 13305 PROVENCE DR

City-St-Zip: PALM BCH GARDENS, FL 33410 City-St-Zip: PALM BCH GARDENS, FL 33410

Title: D () Delete Title: () Change () Addition

 Name:
 SCHACHTER, RHODA,
 Name:

 Address:
 13305 PROVENCE DR
 Address:

 City-St-Zip:
 PALM BCH GARDENS, FL 33410
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 SCHACHTER/MIRKINE, ILENE
 Name:

 Address:
 48 BAYBERRY LANE
 Address:

 City-St-Zip:
 WESTPORT, CT 06880
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition Name: SCHACTHER/CRANDALL, LAUREN Name: SCHACTHER/PAROWER, LAUREN

Address: 237 OLD FARN LN Address: 144 COUNTRY RIDGE DRIVE
City-St-Zip: FAIRFIELD, CT 06432 City-St-Zip: RYE BROOK, NY 10573 US

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: FRANKLIN SCHACHTER PRES 02/13/2007