## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M70367

Address:

City-St-Zip:

FILED Jul 12, 2005 Secretary of State

Entity Na	me: LOUWAI	ERT & SON, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	SET BOULEV CHEY, FL 3460					
Current Mailing Address:			New Mailing Address:			
	SET BOULEV CHEY, FL 3460					
FEI Number	: 59-2879600	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:	
4850 SUN	RT, JAMES SET BOULEV CHEY, FL 346					
	e named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered Age	ent	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD ( LOUWAERT, J 4850 SUNSET PORT RICHEY	BOULEVARD.	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	STD ( LOUWAERT, I 4850 SUNSET PORT RICHEY	BOULEVARD	Title: Name: Address: City-St-Zip:	LOUWAERT,	T BOULEVARD	
Title: Name: Address: City-St-Zip:	V ( ODELL, LOWE 6505 HARBOR HUDSON, FL	DR.	Title: Name: Address: City-St-Zip:	VP ( ODELL, LOW 6505 HARBO HUDSON, FL	R DR.	
Title: Name:	(	) Delete	Title: Name:	T ( LOUWAERT,	( ) Change (X) Addition RICHARD J	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

4850 SUNSET BOULEVARD

PORT RICHEY, FL 34668

SIGNATURE: JAMES LOUWAERT Ρ 07/12/2005