2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001409

City-St-Zip:

FILED Apr 23, 2007 Secretary of State

D 0 0 0 1 V		.000001100				Occircial y	oi otate
Entity Nar	me: TROJAN	LACROSSE, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
	20TH MANOR PRINGS, FL 3	3071					
Current Mailing Address:				New Mailing Address:			
	20TH MANOR PRINGS, FL 3	3071					
FEI Number:	20-2336646	FEI Number Applied For()	FEI Nu	mber Not App	licable ()	Certificate of Status D	esired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
8968 NW 2 CORAL SF	E, LORRAINE 20TH MANOR PRINGS, FL 3	3071 US					
The above in the State	named entity : e of Florida.	submits this statement for t	the purpose of	of changing i	ts registered	d office or registered ag	ent, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent						Date	
OFFICERS	S AND DIREC	TORS:		ADDITION	IS/CHANGE	S TO OFFICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	D () LAMPHERE, LO 8968 NW 20TH CORAL SPRIN	MANOR		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:) Delete		Title: Name: Address: City-St-Zip:	D LETIZIA, MA 612 NW 109 CORAL SPR		
Title: Name: Address:	()) Delete		Title: Name: Address:	D HERZOG, R 9357 NW 5		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: CORAL SPRINGS, FL 33071 US

SIGNATURE: LORRAINE LAMPHERE D 04/23/2007