

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37775

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: LUNAR GEOTECHNICAL INSTITUTE, INC.

## Current Principal Place of Business:

P.O. BOX 5056  
LAKELAND, FL 338075056

## New Principal Place of Business:

76 WOODSIDE DRIVE  
LAKELAND, FL 338133557

## Current Mailing Address:

P.O. BOX 5056  
LAKELAND, FL 338075056

## New Mailing Address:

FEI Number: 59-3010720      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MILLER, MARK N ESQ  
GRAY ROBINSON  
ONE LAKE MORTON DRIVE  
LAKELAND, FL 33802 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

## OFFICERS AND DIRECTORS:

Title: DPV ( ) Delete  
Name: CARRIER, W. DAVID, I, II  
Address: 76 WOODSIDE DRIVE  
City-St-Zip: LAKELAND, FL

Title: DST ( ) Delete  
Name: CARRIER, W. DAVID, I, II  
Address: 76 WOODSIDE DRIVE  
City-St-Zip: LAKELAND, FL

Title: D ( ) Delete  
Name: MILLER, MARK N.,  
Address: 705 LAUREL LANE  
City-St-Zip: LAKELAND, FL

Title: D ( ) Delete  
Name: CARRIER, LILIAN H.,  
Address: 76 WOODSIDE DRIVE  
City-St-Zip: LAKELAND, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPV (X) Change ( ) Addition  
Name: CARRIER, W. DAVID, I, II  
Address: 76 WOODSIDE DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: DST (X) Change ( ) Addition  
Name: CARRIER, W. DAVID, I, II  
Address: 76 WOODSIDE DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: D (X) Change ( ) Addition  
Name: MILLER, MARK N.,  
Address: 1400 GRASSLANDS BLVD, #55  
City-St-Zip: LAKELAND, FL 33803

Title: D (X) Change ( ) Addition  
Name: CARRIER, LILIAN H.,  
Address: 76 WOODSIDE DRIVE  
City-St-Zip: LAKELAND, FL 33813

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

SIGNATURE: W. DAVID CARRIER, III

P

02/19/2009

Electronic Signature of Signing Officer or Director

Date