

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90915 046 ***150.00

DOCUMENT # P0000076086 1. Entity Name LORTON ENTERPRISES, INC.					
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 40 KELLY STREET <small>Suite, Apt. #, etc.</small>			3. Mailing Address 327 YACHT CLUB DRIVE <small>Suite, Apt. #, etc.</small>		
City & State FORT WALTON BEACH, FL <small>Zip Country</small> 32547 OKALOOSA			City & State FORT WALTON BEACH, FL <small>Zip Country</small> 32548 OKALOOSA		
4. FEI Number 59-3663418				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				DO NOT WRITE IN THIS SPACE	
DO NOT WRITE IN THIS SPACE					
7. Name and Address of Current Registered Agent Name LORTON, LARRY P. Street Address (P.O. Box Number is Not Acceptable) 327 YACHT CLUB DRIVE City FORT WALTON BEACH FL Zip Code 32548					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LARRY P. LORTON 327 YACHT CLUB DRIVE FORT WALTON BEACH, FL 32548	TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DIANA L. LORTON 327 YACHT CLUB DRIVE FORT WALTON BEACH, FL 32548	TITLE NAME STREET ADDRESS CITY - ST - ZIP			
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Diana L. Lorton Diana L. Lorton</i></u> 3-31-03 850-315-2317 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

CR2E034B (12/02)