




**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 04, 2005 8:00 am**  
**Secretary of State**

05-04-2005 90187 047 \*\*\*150.00

<b>DOCUMENT # P00000109823</b> 1. Entity Name <b>LOFTON POINTE, INC.</b>																																																																																																																																			
Principal Place of Business <b>1325 ATLANTIC AVENUE FERNANDINA BEACH, FL 32035</b>			Mailing Address <b>P.O. BOX 706 FERNANDINA BEACH, FL 32035 US</b>																																																																																																																																
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address <b>P.O. Box 1200</b>  Suite, Apt. #, etc.																																																																																																																																	
City & State  Zip      Country		City & State <b>Fernandina Beach</b>  Zip      Country <b>32035      Nassau</b>		4. FEI Number <b>59-3685136</b>  Applied For <input type="checkbox"/> Not Applicable																																																																																																																															
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				  <b>50048453</b>																																																																																																																															
6. Name and Address of Current Registered Agent  <b>MOCK, WILLIAM J JR. 1325 ATLANTIC AVE. FERNANDINA BEACH, FL 32034</b>																																																																																																																																			
7. Name and Address of New Registered Agent Name <b>Harry R. Trevett</b> Street Address (P.O. Box Number is Not Acceptable) <b>1325 Atlantic Avenue</b>  City <b>Fernandina Beach</b> <b>FL</b> Zip Code <b>32034</b>				  <b>50048453</b>																																																																																																																															
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, the registered agent.  SIGNATURE <i>Harry R. Trevett</i> <b>Harry R. Trevett</b> <b>4/30/05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE																																																																																																																																			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																																																																																																																	
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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 Block 11 if changed, or on an attachment with an address, with all other persons empowered.																																																																																																																																			
<b>SIGNATURE:</b> <i>Harry R. Trevett</i> <b>Harry R. Trevett, Director</b> <b>4/30/05</b> <b>(904) 261-2235</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #</small>																																																																																																																																			