

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90463 050 ***158.75

DOCUMENT # P00636

1. Entity Name
TROYER BROTHERS, INC.



Principal Place of Business
**10200 RT 6
UNION CITY, PA 16438**

Mailing Address
**10200 RT 6
UNION CITY, PA 16438**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04172007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
25-1106193

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**TROYER, DAVID D.
14700 TROYER BROTHERS RD.
FORT MYERS, FL 33913**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
TROYER, DONALD A.
10200 RT 6
UNION CITY, PA 16438** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VASD
TROYER, DAVID D.
10200 RT 6
UNION CITY, PA 16438** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
TROYER, VERNON J.
10200 RT 6
UNION CITY, PA 16438** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AS
BUDD, DAVID G
3033 RIVIERA DR STE 201
NAPLES, FL 34103** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
**5551 Ridgewood Drive, Suite 501
Naples, FL 34108**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE:

David G. Budd

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/07 (239) 514-1000

Date

Daytime Phone #

DAVID G. BUDD, ASSISTANT SECRETARY