2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2006
Secretary of State

DOCUMENT# P01000002307

Entity Name: LORD & HERTER, INC.

Current Principal Place of Business:

1111 NORT NEW HAMPSHIRE AVE
TAVARES, FL 32778

New Principal Place of Business:

1111 NORTH NEW HAMPSHIRE AVE
TAVARES, FL 32778

Current Mailing Address:

18950 US HWY 441
SUITE 125
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number: 65-1067629 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERTER, THOMAS R
18950 US HWY 441
125
MOUNT DORA, FL 32757 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	HERTER, THOMAS R	
Address:	18950 US HWY 441 SUITE 125	
City-St-Zip:	MOUNT DORA, FL 32757	
Title:	VD	( ) Delete
Name:	HERTER, JEANETTE	
Address:	18950 US HWY 441 SUITE 441	
City-St-Zip:	MOUNT DORA, FL 32757	
Title:	D	( ) Delete
Name:	SOMERS, GEORGE	
Address:	18950 US HWY 441 SUITE 125	
City-St-Zip:	MOUNT DORA, FL 32757	
Title:	TD	( ) Delete
Name:	HERTER, JOSHUA M	
Address:	18950 US HWY 441 SUITE 125	
City-St-Zip:	MOUNT DORA, FL 32757	
Title:	SD	( ) Delete
Name:	MCELVOY, RONALD	
Address:	18950 US HWY 441 SUITE 125	
City-St-Zip:	MOUNT DORA, FL 32757	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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

SIGNATURE: THOMAS R HERTER PRES 02/14/2006

Electronic Signature of Signing Officer or Director — Date