

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000099602

FILED
Jul 29, 2008
Secretary of State

Entity Name: LOSINGER & LOSINGER JUDGEMENT RECOVERY SPECIALISTS, INC.

Current Principal Place of Business:

1127 OAKPOINT CIRCLE
APOPKA, FL 32712

New Principal Place of Business:

375 DOUGLAS AVENUE
1007
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

375 DOUGLAS AVENUE
1007
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3750321 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LOSINGER, TINA G
1127 OAKPOINT CIRCLE
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

LOSINGER, TINA G
375 DOUGLAS AVENUE
1007
ALTAMONTE SPRINGS, FL 32714 US

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

07/29/2008

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOSINGER, TINA G
Address: 1127 OAKPOINT CIRCLE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOSINGER, TINA G
Address: 375 DOUGLAS AVENUE, SUITE 1007
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

SIGNATURE: TINA G. LOSINGER

Electronic Signature of Signing Officer or Director

PD

07/29/2008

Date