## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000019857

Entity Name: THE LOAR GROUP, INC.

FILED Mar 16, 2007 Secretary of State

| ,   |   |                               |   |  |  |
|---|---|-------------------------------|---|--|--|
| Current Principal Place of Business:                  |   |                               | New Principal Place                         | New Principal Place of Business:             |  |
| 20 BRIDGEWATER DR.<br>#302D<br>WINTER HAVEN, FL 33884 |   |                               |   | 20 BRIDGEWATER DR.<br>WINTER HAVEN, FL 33884 |  |
| Current M   | lailing Addre                                     | ss:                           | New Mailing Address                         | New Mailing Address:                         |  |
| P.O. BOX 91216<br>LAKELAND, FL 338041216              |   |                               | P.O. BOX 339<br>EAGLE LAKE, FL 338          | P.O. BOX 339<br>EAGLE LAKE, FL 33839         |  |
| FEI Number  | : 06-1680493                                      | FEI Number Applied For ( )    | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent:         |   |                               | Name and Address o                          | Name and Address of New Registered Agent:    |  |
| WINTER I  | C, NORTHWE<br>HAVEN, FL 3(                        | 3831 US                       | purpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATUI  | RE:   |                               |   |  |  |
| Election Car  |   | nic Signature of Registered A | gent  | Date   |  |
| OFFICERS AND DIRECTORS:                               |   |                               | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:           | D (<br>LOAR, GARY (<br>20 BRIDGEW/<br>WINTER HAVE | ATER DR                       | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:           | D (<br>LOAR, WILLIS<br>20 BRIDGEW/<br>WINTER HAVE | ATER DR.                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

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: GARY G. LOAR D 03/16/2007