2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000032467

Entity Name: DAVID HASBROUCK LUTHER, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5900 NORTH ANDREW AVENUE 617 CLAREMORE DRIVE

SUITE 100 WEST PALM BEACH, FL 33401 FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

5900 NORTH ANDREW AVENUE 617 CLAREMORE DRIVE

SUITE 100 WEST PALM BEACH, FL 33401 FORT LAUDERDALE, FL 33309

FEI Number: 05-0512057 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUTHER, DAVID H
5900 NORTH ANDREW AVE., SUITE #100

LUTHER, DAVID H
617 CLAREMORE DRIVE

FORT LAUDERDALE, FL 33309 US WEST PALM BEACH, FL 33401 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: 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 LUTHER, DAVID H
 Name:
 LUTHER, DAVID H

 Address:
 5900 NORTH ANDREW AVENUE
 Address:
 617 CLAREMORE DRIVE

 City-St-Zip:
 FORT LAUDERDALE, FL 33309
 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: S () Delete Title: S (X) Change () Addition

 Name:
 LUTHER, CHERYL

 Address:
 5900 NORTH ANDREW AVENUE
 Address:
 617 CLAREMORE DRIVE

 City-St-Zip:
 FORT LAUDERDALE, FL 33309
 City-St-Zip:
 WEST PALM BEACH, FL 33401

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: DAVID LUTHER PRES 04/30/2009