2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# P04000055861

Entity Name: LORICCA, INC.

Current Principal Place of Business:

2527 CLARESIDE DRIVE
VALRICO, FL 33594 US

New Principal Place of Business:

10711 SHADY PRESERVE DR
RIVERVIEW, FL 33579 US

Current Mailing Address:

2527 CLARESIDE DRIVE
VALRICO, FL 33594 US

New Mailing Address:

10711 SHADY PRESERVE DR
RIVERVIEW, FL 33579 US

FEI Number: 26-0496084 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WHITCOMB, MICHAEL J
2527 CLARESIDE DRIVE
VALRICO, FL FL US

Name and Address of New Registered Agent:

WHITCOMB, MICHAEL J
10711 SHADY PRESERVE DR
RIVERVIEW, FL FL 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: MICHAEL WHITCOMB 04/24/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WHITCOMB, MICHAEL J
Address: 2527 CLARESIDE DRIVE
City-St-Zip: VALRICO, FL 33594 US

Title: VP ( ) Delete
Name: WHITCOMB, SARAH H
Address: 2527 CLARESIDE DRIVE
City-St-Zip: VALRICO, FL 33594 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WHITCOMB, MICHAEL J
Address: 10711 SHADY PRESERVE DR
City-St-Zip: RIVERVIEW, FL 33579 US

Title: VP (X) Change ( ) Addition
Name: WHITCOMB, SARAH H
Address: 10711 SHADY PRESERVE DR
City-St-Zip: RIVERVIEW, FL 33579 US

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: MICHAEL J WHITCOMB PRES 04/24/2008
Electronic Signature of Signing Officer or Director Date