2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# P04000141708

Entity Name: LARRY LOWE'S HOME REPAIR, INC.

Current Principal Place of Business:

7021 COUNTY RD. 561
CLERMONT, FL 34714

New Principal Place of Business:

6524 CALVIN LEE RD
GROVELAND, FL 34736

Current Mailing Address:

P O BOX 373
GROVELAND, FL 34736

New Mailing Address:

FEI Number: 58-6284542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOWE, LARRY S PRES
7021 COUNTY RD. 561
CLERMONT, FL 34714 US

Name and Address of New Registered Agent:

LOWE, LARRY S PRES
6524 CALVIN LEE RD
GROVELAND, FL 34736 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: 04/24/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LOWE, LARRY S
Address: 7021 COUNTY RD. 561
City-St-Zip: CLERMONT, FL 34714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOWE, LARRY S
Address: 6524 CALVIN LEE RD
City-St-Zip: GROVELAND, FL 34736

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: LARRY S LOWE P 04/24/2007
Electronic Signature of Signing Officer or Director Date