2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165344

Address:

City-St-Zip:

1535 S ORLANDO AVE

COCOA BEACH, FL 32931

Entity Name: O'DONNELL-LUTZ ENTERPRISES, INC.

FILED Feb 26, 2009 Secretary of State

•			,				
Current Principal Place of Business:				New Principal Place of Business:			
	J GALLIE BLV ARBOUR BEA	D .CH, FL 32937	US				
Current Mailing Address:				New Maili	New Mailing Address:		
	J GALLIE BLV ARBOUR BEA	D .CH, FL 32937	US				
FEI Number:	20-2009177	FEI Number App	olied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
INDIAN HA	J GALLIE BLV ARBOUR BEA	.CH, FL 32937	US				
	named entity e of Florida.	submits this state	ement for the p	urpose of changing i	ts registere	d office or registered agent, or both,	
SIGNATUR	RE:						
	Electro	nic Signature of F	Registered Age	ent		Date	
Election Car	npaign Financir	g Trust Fund Conti	ibution ().				
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (LUTZ, PATRIC 3041 SWEET MELBOURNE,	OAK DR		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	S/T (DUGAN, EDITI) Delete I L		Title: Name:	S/T DUGAN, ED	(X) Change()Addition ITH L	

Address:

City-St-Zip:

400 CASSIA BLVD

SATELLITE BEACH, FL 32937

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: PATRICK J. LUTZ P 02/26/2009