

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046733

FILED
Mar 31, 2008
Secretary of State

Entity Name: LONGENECKER FINANCIAL STRATEGIES, INC.

Current Principal Place of Business:

7575 DR. PHILLIPS BOULEVARD
SUITE 100
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

7575 DR. PHILLIPS BOULEVARD
SUITE 100
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 20-2603751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

G&L AGENT SERVICES INC
390 N ORANGE AVE SUITE 600
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

LONGENECKER, LARRY L PD
7575 DR PHILLIPS BOULEVARD
SUITE 100
ORLANDO, FL 32819 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: LARRY L LONGENECKER

03/31/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LONGENECKER, LARRY L
Address: 7575 DR. PHILLIPS BLVD., STE 100
City-St-Zip: ORLANDO, FL 32819 US

Title: TSD () Delete
Name: LONGENECKER, RICKI V
Address: 7575 DR. PHILLIPS BLVD., STE 100
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LARRY L LONGENECKER

PD

03/31/2008

Electronic Signature of Signing Officer or Director

Date