2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000076815

Address:

City-St-Zip:

4327 S HWY 27, 324

CLERMONT, FL 34711

Entity Name: THE LOVEY GROUP, INC.

FILED Feb 25, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of | New Principal Place of Business: | |
|--------------------------------------|--|--|------------------------------------|-----------------------------------|--|
| | AMPAGNE DRIVE | | 1645 E HIGHWAY 50 | | |
| WINTER (| GARDEN, FL 34787 | US | SUITE 207 CLERMONT, FL 34711 | US | |
| O 4 B4 | Marilian ar Andrian and | | | | |
| Current IV | lailing Address: | | New Mailing Address: | | |
| 4327 S HV | VY 27 | | P O BOX 1930 | | |
| BOX 324 | NT, FL 34711 US | | MINNEOLA, FL 34755 | US | |
| | | | | | |
| FEI Number | : 20-3007513 FEI Nu | umber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | d Address of Current | Registered Agent: | Name and Address of | New Registered Agent: | |
| 17757 CH. | ALEXANDER M AMPAGNE DRIVE GARDEN, FL 34787 | US | | | |
| | e of Florida. RE: | | purpose of changing its registered | | |
| Election Car | Electronic Signa mpaign Financing Trust F | ature of Registered Agrund Contribution (). | gent | Date | |
| | S AND DIRECTORS: | ` , | ADDITIONS/CHANGES | S TO OFFICERS AND DIRECTORS | |
| Title: | P () Delete | | |) Change () Addition | |
| Name: | HOWELL, ALEXANDER | М | Name: | / Change () / Mainten | |
| Address: | 4327 S HWY 27, #324 | | Address: | | |
| City-St-Zip: | CLERMONT, FL 34711 | US | City-St-Zip: | | |
| Title: | VP () Delete | | Title: (|) Change () Addition | |
| Name: | HOWELL, MARTHA S | | Name: | | |
| Address: | 4327 S HWY 27, #324 | | Address: | | |
| City-St-Zip: | CLERMONT, FL 34711 | | City-St-Zip: | | |
| Title: | T () Delete | | Title: (|) Change () Addition | |
| Name: | HOWELL, ALEX M | | Name: | | |
| Address: 4327 S HWY 27, 324 | | | Address: | | |
| City-St-Zip: | CLERMONT, FL 34711 | | City-St-Zip: | | |
| Title: Name: | S () Delete HOWELL, MARTHA S | | Title: (Name: |) Change () Addition | |

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.

Address:

City-St-Zip:

SIGNATURE: ALEXANDER M HOWELL P 02/25/2008