

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143289

Entity Name: LORING CO., INC.

FILED
Apr 15, 2007
Secretary of State

Current Principal Place of Business:

15031 U.S. HWY 331 SOUTH
UNIT #132
FREEPORT, FL 32439 US

New Principal Place of Business:

375 SHERWOOD ROAD
DEFUNIAK SPRINGS, FL 32435 US

Current Mailing Address:

15031 U.S. HWY 331 SOUTH
UNIT #132
FREEPORT, FL 32439 US

New Mailing Address:

P.O. BOX 146
FREEPORT, FL 32439 US

FEI Number: 20-3716045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LORING, WILLIAM S
15031 U.S. HWY 331 SOUTH
UNIT #132
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

LORING, WILLIAM S
375 SHERWOOD ROAD
DEFUNIAK SPRINGS, FL 32435 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:

04/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P-D () Delete
Name: LORING, WILLIAM S
Address: 15031 U.S. HWY 331 SOUTH, UNIT #132
City-St-Zip: FREEPORT, FL 32439 US

Title: VP () Delete
Name: LORING, JAKE E
Address: 15031 U.S. HWY 331 SOUTH, UNIT#132
City-St-Zip: FREEPORT, FL 32439 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P-D (X) Change () Addition
Name: LORING, WILLIAM S
Address: 375 SHERWOOD ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32435 US

Title: VP (X) Change () Addition
Name: LORING, JAKE E
Address: 375 SHERWOOD ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32435 US

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: WILLIAM S LORING

P-D

04/15/2007

Electronic Signature of Signing Officer or Director

Date