

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000160855

Entity Name: RALPH E. LOCHER, P.A.

FILED  
Feb 11, 2009  
Secretary of State

## Current Principal Place of Business:

2445 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33020

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 2480  
HOLLYWOOD, FL 33022

## New Mailing Address:

FEI Number: 42-1686668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CONNOLLY ZELDIS, P.A.  
915 MIDDLE RIVER DRIVE  
SUITE 600  
FT. LAUDERDALE, FL 33304 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: LOCHER, RALPH E  
Address: 2445 HOLLYWOOD BLVD.  
City-St-Zip: HOLLYWOOD, FL 33020 FL

Title: S ( ) Delete  
Name: LOCHER, RALPH E  
Address: 2445 HOLLYWOOD BLVD.  
City-St-Zip: HOLLYWOOD, FL 33020

Title: T ( ) Delete  
Name: LOCHER, RALPH E  
Address: 2445 HOLLYWOOD BLVD.  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: RALPH E. LOCHER

P/D

02/11/2009

Electronic Signature of Signing Officer or Director

Date