


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2007 8:00 am
Secretary of State

08-23-2007 90023 038 ***150.00

DOCUMENT # P06000020715		
1. Entity Name WILKES LOESSER, INC.		

Principal Place of Business 1086 WINDING RIVER ROAD VERO BEACH, FL 32963	Mailing Address 1086 WINDING RIVER ROAD VERO BEACH, FL 32963
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

08102007 Chg-P CR2E034 (12/06)	
4. FEI Number 20-4310742	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
ROBERT A. BURSON, P.A. 310 WEST FIRST STREET STUART, FL 34994	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

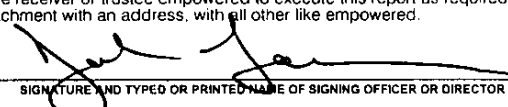
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR LOESSER, JOHN 1086 WINDING RIVER ROAD VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **John Loesser** 8/17/07 772.220.1942

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

CAIN & FIRLEY, P.A.

40130006

CERTIFIED PUBLIC ACCOUNTANTS
55 E. OSCEOLA ST., SUITE 202
STUART, FLORIDA 34994

PHONE (772) 288-2020
FAX (772) 220-0090

August 20, 2007

Division of Corporations
PO Box 6198
Tallahassee, FL 32314

Re: Wilkes Loesser, Inc
Document #P06000020715

Dear Sirs:

Wilkes Loesser, Inc did not receive the postcard in the beginning of the year to file and pay the 2007 For Profit Corporation Annual Report by May 1st. This is the first year for the corporation and the shareholders were not aware of the need for this filing.

Please waive the \$400.00 penalty for reasonable cause.

Sincerely,



Sinikka Firley