JUN-02-08 10:25 FROM-

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Jun 04, 2008 8:00 am
Secretary of State

04-30-2008 90194 001 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P07000099676

1. Entity Name
LORD MORTGAGE & LOAN, INC.

Principal Place of Business
1210 S FEDERAL HIGHWAY
#102
BOYNTON BEACH, FL 33435 US

Mailing Address
1210 S FEDERAL HIGHWAY
#102
BOYNTON BEACH, FL 33435 US

66013154

04232008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 26-0873992 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KLAPHOTZ, JOE
1210 S. FEDERAL HIGHWAY
#102
BOYNTON BEACH, FL 33435

7. Name and Address of New Registered Agent
Name: Joseph P. Klapholz, Esq.
Street Address (P.O. Box Number is Not Acceptable): 2500 Hollywood Blvd, # 212
City: Hollywood FL Zip Code: 33020

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 ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P NEADEL, ROBERT 6711 NW OCEAN BLVD. OCEAN RIDGE, FL 33435 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Robert Neadel 1210 S Federal Hwy., #102 Boyton Beach, FL 33435 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Mona Neadel 1210 S Federal Hwy., #102 Boyton Beach, FL 33435 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE: [signature] 4/28/08 954 920 6866
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JUN/02/2008/MON 10:46 AM LORD MORTGAGE CO. FAX No. 561 369 1613 P. 003