

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000070818

Entity Name: LORWELL & CO., INC.

FILED  
Feb 24, 2007  
Secretary of State

**Current Principal Place of Business:**

6017 PINE RIDGE RD  
NAPLES, FL 34119 US

**New Principal Place of Business:**

**Current Mailing Address:**

6017 PINE RIDGE RD.  
PMB 333  
NAPLES, FL 34119 US

**New Mailing Address:**

FEI Number: 65-0607065      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CAPWELL, ROBERT A.  
6017 PINE RIDGE ROAD  
PMB 333  
NAPLES, FL 34119 US

**Name and Address of New Registered Agent:**

CAPWELL, ROBERT A PRES  
6017 PINE RIDGE ROAD  
PMB 333  
NAPLES, FL 34119 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: ROBERT A. CAPWELL      02/24/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: CAPWELL, ROBERT A  
Address: 6017 PINE RIDGE ROAD  
City-St-Zip: NAPLES, FL 34119 US

Title: D      ( ) Delete  
Name: CAPWELL, LORETTA  
Address: 6017 PINE RIDGE ROAD  
City-St-Zip: NAPLES, FL 34119 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: CAPWELL, ROBERT A PRES  
Address: 6017 PINE RIDGE ROAD  
City-St-Zip: NAPLES, FL 34119 US

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

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: ROBERT A. CAPWELL      PRES      02/24/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date