

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90011 026 ***158.75

DOCUMENT # P96000091583

1. Entity Name
LOVELL PROPERTIES, INC.



Principal Place of Business
**16021 ABERDEEN WAY
MIAMI LAKES, FL 33014 US**

Mailing Address
**2637 MORNINGSIDE TRAIL
KENNESAW, GA 30144 US**

40000013



01202005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0726865	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MORGAN, CHARLES O JR.
1300 N.W. 167TH STREET
STE 3
MIAMI, FL 33169**

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS LOVELL, RUTH A 16021 ABERDEEN WAY MIAMI LAKES, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV NUNNERY, VALERIE 8262 NW 484 ST 2637 Morningside Trail MIAMI, FL 33016 Kennesaw GA 30144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T O'BRIEN, RICHARD 721 SETON RD COLUMBIA, SC 29212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MORGAN, CHARLES O JR 1300 NW 167TH ST STE 3 MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Valerie Nunnery

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/05

Date

770-514-1698

Daytime Phone #