2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000099155

Entity Name: LOHRENGEL & ASSOCIATES, INC.

FILED Jan 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

325 JOHN KNOX RD 2121 KILLARNEY WAY TALLAHASSEE, FL 32309 L-103

TALLAHASSEE, FL 32303

New Mailing Address: Current Mailing Address:

7510 REFUGE ROAD 1400 VILLAGE SQUARE BLVD TALLAHASSEE, FL 32312 #3-175 TALLAHASSEE, FL 32312

FEI Number: 59-3422596 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LOHRENGEL, PETER LOHRENGEL, PETER 325 JOHN KNOX RD 1400 VILLAGÉ SQUARE BLVD L-103 #3-175 TALLAHASSEE, FL 32303 US TALLAHASSEE, FL 32312 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: 01/18/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LOHRENGEL, PETER LOHRENGEL, PETER Name: Name:

325 JOHN KNOX RD, L-103 1400 VILLAGE SQUARE BLVD #3-175 Address: Address:

City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32312

Title: Title: (X) Change () Addition () Delete LOHRENGEL, JULIE LOHRENGEL, JULIE Name: Name:

Address:

325 JOHN KNOX RD, L-103 Address: 1400 VILLAGE SQUARE BLVD #3-175

City-St-Zip: TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32312 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.

Ρ SIGNATURE: PETER LOHRENGEL 01/18/2009

Electronic Signature of Signing Officer or Director

Date