


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000034564**

1. Entity Name  
**TREISER-LOEHR, INC.**



Principal Place of Business  
**P.O. BOX 7652  
ST PETERSBURG, FL 33734**

Mailing Address  
**P.O. BOX 7652  
ST PETERSBURG, FL 33734**



01222007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3506778** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BERNSTEIN, ANITA T  
5088 SHORE ACRES BLVD NE  
SAINT PETERSBURG, FL 33703**

**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, 2007 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	PSD BERNSTEIN, ANITA TREISER 5088 SHORE ACRES BLVD NE SAINT PETERSBURG, FL 33703
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD LOEHR, NANCY E 13309 BOCA CIEGA AVE SAINT PETERSBURG, FL 33708
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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02/05/07-80029-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:** *Anita Treiser Bernstein, Pres.* **1/29/07** **727-526-6350**

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