

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000068749

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: LORANDO HOLDINGS CORP.

**Current Principal Place of Business:**

12626 HANCOCK RD  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

470 ANNANDALE DR  
OYSTER BAY COVE, NY 11791

**New Mailing Address:**

FEI Number: 59-3529401

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DVPS ( ) Delete  
Name: LUNEBURG, RICHARD  
Address: 13251 52ND PLACE SOUTH  
City-St-Zip: WELLINGTON, FL

Title: PTD ( ) Delete  
Name: LUNEBURG, DONALD  
Address: 470 ANNANDALE DR  
City-St-Zip: OYSTER BAY COVE, NY

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: DONALD LUNEBURG

DVPS

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date