

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000082947

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: LOTSPEICH COMPANY SOUTHWEST, INC.

## Current Principal Place of Business:

11800 LACY LN.  
FORT MYERS, FL 33966

## New Principal Place of Business:

## Current Mailing Address:

16101 NW 54 AVE  
MIAMI, FL 33014

## New Mailing Address:

FEI Number: 65-0959476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LOTSPEICH, JAY W  
16101 NW 54 AVE  
MIAMI, FL 33014 US

## Name and Address of New Registered Agent:

MANDICH, JAMES M STD  
16101 NW 54 AVE  
MIAMI, FL 33014 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: JAMES M MANDICH

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: MANDICH, JIM  
Address: 16101 NW 54 AVE  
City-St-Zip: MIAMI, FL 33014

Title: PD ( ) Delete  
Name: MASSON, SCOTT  
Address: 16101 NW 54 AVE  
City-St-Zip: MIAMI, FL 33014

Title: D ( ) Delete  
Name: LOTSPEICH, JAY W  
Address: 16101 NW 54 AVE  
City-St-Zip: MIAMI, FL 33014

Title: VP ( ) Delete  
Name: IRVINE, DOUGLAS A  
Address: 16101 NW 54 AVE  
City-St-Zip: MIAMI, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition  
Name: MANDICH, JAMES M  
Address: 16101 NW 54 AVE  
City-St-Zip: MIAMI, FL 33014

Title: VPD (X) Change ( ) Addition  
Name: MASSON, SCOTT  
Address: 16101 NW 54 AVE  
City-St-Zip: MIAMI, FL 33014

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

Title: P (X) Change ( ) Addition  
Name: IRVINE, DOUGLAS A  
Address: 16101 NW 54 AVE  
City-St-Zip: MIAMI, FL 33014

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: SCOTT MASSON

VPD

01/04/2008

Electronic Signature of Signing Officer or Director

Date