2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2006
Secretary of State

DOCUMENT# P99000044698

Entity Name: LUMOR, INC.

Current Principal Place of Business:

11629 FALLING LEAF TRAIL
JACKSONVILLE, FL 32258

New Principal Place of Business:

7917 ABINGTON HILLS LANE
JACKSONVILLE, FL 32256

Current Mailing Address:

11250-15 OLD ST. AUGUSTINE RD.
PMB 175
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-3577643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, JEFFERY B
2064 PARK STREET
JACKSONVILLE, FL 32204 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: P ( ) Delete
Name: LUELLEN, MATTHEW D
Address: 11250-15 OLD ST. AUGUSTINE RD. PMB 175
City-St-Zip: JACKSONVILLE, FL 32257

Title: S ( ) Delete
Name: LUELLEN, MATHEW D
Address: 11250-15 OLD ST. AUGUSTINE RD. PMB 175
City-St-Zip: JACKSONVILLE, FL 32257

Title: T ( ) Delete
Name: MORRIS, JEFFERY B
Address: 2064 PARK STREET
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: MATTHEW D. LUELLEN P 01/24/2006
Electronic Signature of Signing Officer or Director — Date