

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052051

FILED  
Apr 23, 2005  
Secretary of State

Entity Name: LORD & LORD LIMITED GROUP, INC.

## Current Principal Place of Business:

5105 GRACEWOOD LANE  
ST. AUGUSTINE, FL 32092

## New Principal Place of Business:

112 HONDO DRIVE  
ST. AUGUSTINE, FL 32086

## Current Mailing Address:

5105 GRACEWOOD LANE  
ST. AUGUSTINE, FL 32092

## New Mailing Address:

112 HONDO DRIVE  
ST. AUGUSTINE, FL 32086

FEI Number: 59-3580602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LORD, DAVID L  
5105 GRACEWOOD LANE  
SAINT AUGUSTINE, FL 32092 US

## Name and Address of New Registered Agent:

LORD, DAVID L  
112 HONDO DRIVE  
SAINT AUGUSTINE, FL 32086 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: \_\_\_\_\_

04/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: LORD, DAVID L  
Address: 5105 GRACEWOOD LANE  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: SVD ( ) Delete  
Name: LORD, TRACY L  
Address: 5105 GRACEWOOD LANE  
City-St-Zip: ST. AUGUSTINE, FL 32092

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: LORD, DAVID L  
Address: 112 HONDO DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: SVD (X) Change ( ) Addition  
Name: LORD, TRACY L  
Address: 112 HONDO DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID L. LORD

PTD

04/23/2005

Electronic Signature of Signing Officer or Director

Date