2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 16, 2007 08:00 A Secretary of State

	ANNUAL	REPORT			C 4 C C4	
DOCUMENT # P9900067944 1. Entity Name LOHER'S PROPERTIES, INC.]	Secretary of St	
LOMERS	-ROPERTIES, INC.					
Principal Place of 5143 COMMER SPRING HILL, F	RCIAL WAY	Mailing Address 5143 COMMERCIAL WAY SPRING HILL, FL 34606	 			
3 TKINO HILL, F		SPRING HILL, PL 34000		<u> </u> 		
				, , , , , , , , , , , , , , , , , , , ,		
DO NOT WRITE IN THIS SPA			CE	02242007 4. FEI Number		
,	ر از			59-358 5. Certificate	9265 Not Applicable of Status Desired	
	6. Name and Address of Current Re					
LOHER, DONALD W 5143 COMMERCIAL WAY SPRING HILL, FL 34606					NOT WRITE	
3) 1(110 File	LE, TE 04000				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	gnature, typed or printed name of registered agent and	tille if applicable. (NOTE: Register	ed Agent signature required	i when reinstaling)	DATE	
	NOWIII FEE IS \$150.00 , 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution		.00 May Be ed to Fees		
10.	OFFICERS AND DI	RECTORS		·		
NAME L STREET ADDRESS 5	DPST LOHER, DONALD W 5143 COMMERCIAL WAY SPRING HILL, FL 34606			,	U00000710347 04/25/07-80039-016 150.qq	
TITLE NAME				•		
STREET ADDRESS CITY-ST-ZIP			1			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME			-	IN THIS SPACE		
STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS			,			
CITY-SI-ZIP TITLE						
NAME STREET ADDRESS			, <i>.</i>			

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 the empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE?

DONALD LOHER