

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000102265

Entity Name: LATHERS, INC.

FILED  
Jan 09, 2008  
Secretary of State

## Current Principal Place of Business:

16687 115 AVENUE NORTH  
JUPITER, FL 33478 US

## New Principal Place of Business:

228 HIBISCUS ST  
SUITE # 3  
JUPITER, FL 33458 US

## Current Mailing Address:

16687 115 AVENUE NORTH  
JUPITER, FL 33478 US

## New Mailing Address:

228 HIBISCUS ST  
SUITE # 3  
JUPITER, FL 33458 US

FEI Number: 65-0963980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KELLOGG, TIM  
13435 151 LANE NORTH  
JUPITER, FL 33478 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: PSD ( ) Delete  
Name: KELLOGG, TIMOTHY MR.  
Address: 13435 151 LANE NORTH  
City-St-Zip: JUPITER, FL 33478

Title: VTD ( ) Delete  
Name: COLLINS, RICHARD  
Address: 16687 115 AVENUE NORTH  
City-St-Zip: JUPITER, FL 33478

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: COLLINS, CONNIE L  
Address: 16687 155TH AVE NORTH  
City-St-Zip: JUPITER, FL 33478

Title: VD (X) Change ( ) Addition  
Name: KELLOGG, DONNA M  
Address: 13435 131 LANE NORTH  
City-St-Zip: JUPITER, FL 33478

Title: TD ( ) Change (X) Addition  
Name: COLLINS, RICHARD E  
Address: 16687 115TH AVE NORTH  
City-St-Zip: JUPITER, FL 33478

Title: SD ( ) Change (X) Addition  
Name: KELLOGG, TIMOTHY L  
Address: 13435 131 LANE NORTH  
City-St-Zip: JUPITER, FL 33478

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: CONNIE COLLINS

PD

01/09/2008

Electronic Signature of Signing Officer or Director

Date