

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V07905

FILED  
Jan 30, 2007  
Secretary of State

Entity Name: LARAMIE INVESTMENT GROUP, INC.

## Current Principal Place of Business:

1101 S E CORAL REEF ST  
PORT SAINT LUCIE, FL 34983 US

## New Principal Place of Business:

1927 CYPRESS AVENUE  
FORT PIERCE, FL 34949 US

## Current Mailing Address:

1101 S E CORAL REEF ST  
PORT SAINT LUCIE, FL 34983 US

## New Mailing Address:

1927 CYPRESS AVENUE  
FORT PIERCE, FL 34949 US

FEI Number: 65-0305904

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GLAZER, DONALD  
1101 SE CORAL REEF ST  
PORT SAINT LUCIE, FL 34983 US

## Name and Address of New Registered Agent:

GLAZER, DONALD J MR  
1927 CYPRESS AVENUE  
FORT PIERCE, FL 34949 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: DONALD J. GLAZER

01/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GLAZER, DONALD  
Address: 1101 CORAL REEF ST  
City-St-Zip: PORT SAINT LUCIE, FL 34983

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GLAZER, DONALD  
Address: 1927 CYPRESS AVENUE  
City-St-Zip: FORT PIERCE, FL 34949

Title: S/D ( ) Change (X) Addition  
Name: GILLON, CAROLYN M  
Address: 1928 CYPRESS AVENUE  
City-St-Zip: FORT PIERCE, FL 34949

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: DONALD J. GLAZER

PD

01/30/2007

Electronic Signature of Signing Officer or Director

Date