

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007497

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** OLIVER-HOFFMANN CORPORATION

**Current Principal Place of Business:**

7 S. 251 OLESEN DR  
NAPERVILLE, IL 60540

**New Principal Place of Business:**

**Current Mailing Address:**

7 S. 251 OLESEN DR  
NAPERVILLE, IL 60540

**New Mailing Address:**

**FEI Number:** 36-2385998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHINDEL, MATTHEW G  
3801 PGA BLVD.  
SUITE 901  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

SCHINDEL, MATTHEW G  
3801 PGA BLVD.  
SUITE #901  
PALM BEACH GARDENS, FL 33410 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/27/2010

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: HOFFMANN, CAMILLE O  
Address: 3801 PGA BLVD, SUITE #901  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby 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 all other like empowered.

SIGNATURE: CAMILLE O HOFFMANN

PRES

04/27/2010

Electronic Signature of Signing Officer or Director

Date