## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 139627** 

Address:

City-St-Zip:

Entity Name: GLADES MERCANTILE CO. INC.

73 DR MARTIN LUTHER KING JR BLVD EAST

BELE GLADE, FL 33430

FILED Apr 28, 2009 Secretary of State

Littley Iva	me. OLADEC	TWIENCANTILE CO., INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	RTIN LUTHER ADE, FL 334:	R KING JR BLVD EAST 30			
Current Mailing Address:			New Mailing Address:		
P. O. BOX BELLE GL	(1900 .ADE, FL 334;	30			
FEI Number: 59-0264520 FEI Number Applied For ( )		FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
73 DR MA	AN, JOE M. IRTIN LUTHEF LADE, FL 3343	R KING JR BLVD EAST 30 US			
	e named entity e of Florida.	submits this statement for the	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU					
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ALDERMAN, J 73 DR MARTIN	N LUTHER KING JR BLVD EAST	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name:	PRES ( ALDERMAN. J	) Delete OE M	Title: Name:	( ) Change ( ) Addition	

Address:

City-St-Zip:

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: JOE M ALDERMAN P 04/28/2009