

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003292

FILED
Jan 04, 2008
Secretary of State

Entity Name: HAYLOR, FREYER & COON, INC.

Current Principal Place of Business:

231 SALINA MEADOWS PARKWAY
SUITE 200
SYRACUSE, NY 132124559 US

New Principal Place of Business:

Current Mailing Address:

231 SALINA MEADOWS PARKWAY
P O BOX 4743
SYRACUSE, NY 132214743 US

New Mailing Address:

FEI Number: 15-0547748 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, JOHN D ESQ.
1267 BERKSHIRE LANE
SUITE 200
TARPON SPRINGS, FL 34688 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: CEO () Delete
Name: DISERIO, VICTOR A
Address: 5192 FORESTEDGE DRIVE
City-St-Zip: SYRACUSE, NY 13215

Title: VCFO () Delete
Name: MCANANEY, MARK E
Address: 4441 ADLAI DRIVE
City-St-Zip: SYRACUSE, NY 13215

Title: V () Delete
Name: DRIBNAK, MICHAEL
Address: 8224 WILLOW LANE
City-St-Zip: NIWOT, CO 80503

Title: V () Delete
Name: RAYO, ROBERT J
Address: 7588 RANIA ROAD
City-St-Zip: BALDWINVILLE, NY 10327

Title: VS () Delete
Name: FREYER, JAMES D JR.
Address: 4504 RED SPRUCE LANE
City-St-Zip: MANLIUS, NY 13104

Title: VT () Delete
Name: STODDARD, JAMES A JR.
Address: 30 ORANGEWOOD DRIVE
City-St-Zip: LIVERPOOL, NY 13090

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: MARK E MCANANEY

VCFO

01/04/2008

Electronic Signature of Signing Officer or Director

_____ Date