

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J05257

Entity Name: M & W WHOLESale, INC.

FILED  
Mar 23, 2009  
Secretary of State

## Current Principal Place of Business:

% DONALD VICTOR MITCHELL  
825 GULF BREEZE PKWY.  
GULF BREEZE, FL 32561

## New Principal Place of Business:

825 GULF BREEZE PKWY  
GULF BREEZE, FL 32561 US

## Current Mailing Address:

% DONALD VICTOR MITCHELL  
825 GULF BREEZE PKWY.  
GULF BREEZE, FL 32561

## New Mailing Address:

825 GULF BREEZE PKWY  
GULF BREEZE, FL 32561 US

FEI Number: 59-2668543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, DONALD VICTOR  
825 GULF BREEZE PKWY.  
GULF BREEZE, FL 32561 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: D ( ) Delete  
Name: MITCHELL, DONALD VIC, TOR  
Address: 825 GULF BREEZE PKWY.  
City-St-Zip: GULF BREEZE, FL

Title: PD ( ) Delete  
Name: WRIGHT, JOHN CALVIN,  
Address: 825 GULF BREEZE PKWY.  
City-St-Zip: GULF BREEZE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MITCHELL, DONALD VIC, TOR  
Address: 825 GULF BREEZE PKWY.  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: PD (X) Change ( ) Addition  
Name: WRIGHT, JOHN CALVIN,  
Address: 825 GULF BREEZE PKWY.  
City-St-Zip: GULF BREEZE, FL 32561 US

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: D VICTOR MITCHELL

D

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date