

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24281

FILED
Jan 19, 2009
Secretary of State

Entity Name: J. FLETCHER CREAMER & SON, INC.

Current Principal Place of Business:

101 E BROADWAY
HACKENSACK, NJ 07601

New Principal Place of Business:

Current Mailing Address:

101 E BROADWAY
HACKENSACK, NJ 07601

New Mailing Address:

FEI Number: 21-0665029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES INC
2731 EXECUTIVE PARK DR SUITE 4
WESTON, FL 33331 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: VPD () Delete
Name: CREAMER, DALE A
Address: 426 AIRMOUNT AVE
City-St-Zip: RAMSEY, NJ 07446

Title: EVPD () Delete
Name: CREAMER, GLENN L
Address: 175 CHESTNUT RIDGE ROAD
City-St-Zip: SADDLE RIVER, NJ 07458

Title: PRES () Delete
Name: WALSH, JOSEPH T.,
Address: 23 WINDING BROOK WAY
City-St-Zip: SHREWSBURY, NJ 07702 US

Title: CEO () Delete
Name: CREAMER, J FLETCHER JR.
Address: 158 ASHLEY PLACE
City-St-Zip: PARK RIDGE, NJ 07656

Title: S () Delete
Name: MARAFINO, ESTELLE R
Address: 41 VAN ORDEN RD
City-St-Zip: HARRINGTON PARK, NJ 07640

Title: TREA () Delete
Name: FEDORCHAK, ROGER
Address: 392 UNION AVENUE
City-St-Zip: CLIFTON, NJ 07011 US

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:

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: JOSEPH T. WALSH

PRES

01/19/2009

Electronic Signature of Signing Officer or Director

_____ Date