

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000050093

FILED
Jan 21, 2009
Secretary of State

Entity Name: MCCRIMON'S OFFICE SYSTEMS, INC.

Current Principal Place of Business:

111 COURT ST
LIVE OAK, FL 32064

New Principal Place of Business:

Current Mailing Address:

PO BOX B
LIVE OAK, FL 32064 US

New Mailing Address:

FEI Number: 59-3193270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASEY, WILLIAM J CPA
106 WHITE AVE
LIVE OAK, FL 32064 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: PD () Delete
Name: CLARK, JAMES M
Address: 6470 SW 70TH ST
City-St-Zip: TRENTON, FL 32693

Title: VSTD () Delete
Name: SCOTT, MATTHEW A
Address: 8860 135TH. ROAD
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES M. CLARK

PRES

01/21/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date