

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000086488

FILED
Apr 12, 2009
Secretary of State

Entity Name: ARNOLD R. MEYER FAMILY HOLDINGS, INC.

Current Principal Place of Business:

2395 PHEASANT LANE
WESTON, FL 33327 US

New Principal Place of Business:

Current Mailing Address:

2395 PHEASANT LANE
WESTON, FL 33327 US

New Mailing Address:

FEI Number: 65-0708676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, BARRY A
C/O NELSON & NELSON, P.A.
2775 SUNNY ISLES BLVD., SUITE 118
N. MIAMI BEACH, FL 33160 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: DPT () Delete
Name: GILLMAN, JACQUELINE
Address: 2395 PHEASANT LANE
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: ECOLONO, KATHY
Address: 10790 CAMERON COURT
City-St-Zip: DAVIE, FL 33324

Title: D () Delete
Name: MEYER, JON A
Address: 169 E. BAYBRIDGE DR.
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: MCCARTHY, LYNDA RAE
Address: P.O. BOX 117
City-St-Zip: ASPEN, CO 81612

Title: D () Delete
Name: BARNEY, DEBORAH M
Address: 8300 NW 72ND ST
City-St-Zip: PARKLAND, FL 33067

Title: D () Delete
Name: NIELSON, SUSAN S
Address: 6118 N. 12TH PLACE, UNIT 10
City-St-Zip: PHOENIX, AZ 85014

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
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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: JACQUELINE GILLMAN

P

04/12/2009

Electronic Signature of Signing Officer or Director

_____ Date