## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000010943

Entity Name: PETER HALMOS & SONS, INC.

FILED Apr 07, 2009 Secretary of State

700 SOUTH OLIVE AVENUE 700 SOUTH OLIVE AVENUE W. PALM BCH, FL 33401 WEST PALM BCH, FL 33401

Current Mailing Address: New Mailing Address:

5725 CORPORATE WAY
STE 101
WEST PALM BEACH, FL 33407

C/O 5725 CORPORATE WAY
STE 101
WEST PALM BEACH, FL 33407

WEST PALM BEACH, FL 33407

FEI Number: 65-0808606 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEYERS, GAIL C
C/O MEYERS AND ASSOCIATES, CPA, PA
5725 CORPORATE WAY
WEST PALM BEACH, FL 33407 US

MEYERS, GAIL C
C/O MEYERS AND ASSOCIATES, CPA, PA
5725 CORPORATE WAY SUITE 101
WEST PALM BEACH, FL 33407 US

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: 04/07/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: HALMOS, PETER Name: HALMOS, PETER

 Address:
 700 S. OLIVE AVENUE
 Address:
 700 S. OLIVE AVENUE

 City-St-Zip:
 W. PALM BCH, FL 33401
 City-St-Zip:
 WEST PALM BCH, FL 33401

 Name:
 MEYERS, GAIL C
 Name:

 Address:
 5725 CORPORATE WAY #101
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33407
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KIRKPATRICK, MICHAEL
 Name:

 Address:
 700 S. OLIVE AVENUE
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:

Title: S ( ) Delete Title: S (X) Change ( ) Addition

Name:HALMOS, NICHOLAS KName:HALMOS, NICHOLAS KAddress:5725 CORPORATE WAY, STE. 101Address:700 S. OLIVE AVENUE

City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33401

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: GAIL C. MEYERS T 04/07/2009