

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 002086

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: GLEASON BROTHERS AND COMPANY

## Current Principal Place of Business:

1300 PINETREE DR.  
STE. 13  
INDIAN HARBOUR BEACH, FL 32937

## New Principal Place of Business:

## Current Mailing Address:

GEORGE G. HELLIER  
P.O. BOX 361546  
MELBOURNE, FL 329361546

## New Mailing Address:

FEI Number: 59-6075200      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KRASNY, MIKE  
304 S. HARBOR CITY BLVD.  
SUITE 201  
MELBOURNE, FL 32901 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: SD ( ) Delete  
Name: TRAVIS, MARY N  
Address: 2815 S. ATLANTIC AVE. #603  
City-St-Zip: COCOA BEACH, FL

Title: PD ( ) Delete  
Name: HELLIER, GEORGE G.  
Address: 420 CAMELIA TR  
City-St-Zip: ST. AUGUSTING, FL

Title: D ( ) Delete  
Name: GORDON, ROBERT  
Address: 635 41ST AVE  
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: T (X) Delete  
Name: GLEASON, LARIE L  
Address: 407 PIRATES MOON CT  
City-St-Zip: INDIALANTIC, FL 32903

Title: VPD ( ) Delete  
Name: MADRY, JANE G  
Address: 1817 PINEAPPLE AVE  
City-St-Zip: MELBOURNE, FL 32935

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition  
Name: TRAVIS, MARY N  
Address: 270 POINCIANA DRIVE  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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: MARY NELL GLEASON TRAVIS

STD

02/24/2009

Electronic Signature of Signing Officer or Director

Date