

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 003110

FILED  
Jul 14, 2009  
Secretary of State

Entity Name: MAYES PRINTING COMPANY

## Current Principal Place of Business:

6120 N. PENSACOLA BLVD.  
PENSACOLA, FL 32505

## New Principal Place of Business:

6120 PENSACOLA BLVD.  
PENSACOLA, FL 32505

## Current Mailing Address:

P.O. BOX 1952  
PENSACOLA, FL 32591

## New Mailing Address:

FEI Number: 59-0349550      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PHELPS,JOHN F  
6120 N. PENSACOLA BLVD.  
PENSACOLA, FL 32505      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: PHELPS, JOHN F  
Address: 406 N SUNSET BLVD  
City-St-Zip: GULF BREEZE, FL

Title: STD ( ) Delete  
Name: PHELPS, ANN L  
Address: 406 N SUNSET BLVD  
City-St-Zip: GULF BREEZE, FL

Title: D ( ) Delete  
Name: JONES, STEPHEN C  
Address: 6121 CONFEDERATE DR  
City-St-Zip: PENSACOLA, FL

## 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:

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: ANN L PHELPS

STD

07/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date