

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 218069

FILED
Mar 02, 2009
Secretary of State

Entity Name: GARY LEE FORD COMPANY

Current Principal Place of Business:

541 MARY ESTHER CUTOFF
FT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

PO BOX 1447
FORT WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 59-0856162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, ROBERT E
541 MARY ESTHER CUT-OFF
FORT WALTON BEACH, FL 32548 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: LEE, ROBERT E,
Address: 541 MARY ESTHER CUTOFF
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SD () Delete
Name: LEE, JOHN M,
Address: 3905 INDIAN TRAIL
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEE, ROBERT E
Address: 541 MARY ESTHER CUTOFF
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SD (X) Change () Addition
Name: LEE, JOHN M
Address: 3905 INDIAN TRAIL
City-St-Zip: DESTIN, FL 32541

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: ROBERT E LEE

PD

03/02/2009

Electronic Signature of Signing Officer or Director

Date