

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 274497

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: MEAD-RAYMOND CORP.

## Current Principal Place of Business:

C/O PRENTICE-HALL CORP SYSTEM, INC.  
1201 HAYES ST., STE. 105  
TALLAHASSEE, FL 32301 US

## New Principal Place of Business:

## Current Mailing Address:

C/O PRENTICE-HALL CORP SYSTEM, INC.  
1201 HAYES ST., STE. 105  
TALLAHASSEE, FL 32301 US

## New Mailing Address:

FEI Number: 59-1028122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CSC CORPORATION SERVICE CO  
1201 HAYES ST.  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

CSC CORPORATION SERVICE CO  
1201 HAYES ST  
TALLAHASSEE, FL 32301 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/23/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: MEAD, DUANE D,  
Address: BOX 130967 N/A  
City-St-Zip: TYLER, TX

Title: SD ( ) Delete  
Name: MEAD, MARY,  
Address: BOX 130967 N/A  
City-St-Zip: TYLER, TX

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: MEAD, DUANE D,  
Address: BOX 130967  
City-St-Zip: TYLER, TX

Title: SD (X) Change ( ) Addition  
Name: MEAD, MARY,  
Address: BOX 130967  
City-St-Zip: TYLER, TX

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: DUANE D. MEAD

Electronic Signature of Signing Officer or Director

PRES

01/23/2009

Date