2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 285584

Entity Name: C. F. M. INC.

FILED Jan 27, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

SOUTHEAST HUNT BROTHERS RD 2404 S.E. HUNT BROS. RD. BOX 631 LAKE WALES, FL 33898

LAKE WALES, FL 338590631

Current Mailing Address: New Mailing Address:

SOUTHEAST HUNT BROTHERS RD P. O. BOX 631

BOX 631 LAKE WALES, FL 338590631 LAKE WALES, FL 338590631

FEI Number: 59-1061023 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:

MATTESON, JOHN, S
S.E. HUNT BROS. RD
LAKE WALES, FL 33853 US

MATTESON, JOHN S
2404 S.E. HUNT BROS. RD.
LAKE WALES, FL 33898 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: JOHN S MATTESON 01/27/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

 Name:
 HUNT, FRANK M., III,
 Name:
 HUNT, FRANK M.III

 Address:
 EAST HUNT BROS. ROAD
 Address:
 2404 S.E. HUNT BROS. RD.

 City-St-Zip:
 LAKE WALES, FL
 City-St-Zip:
 LAKE WALES, FL 33898

Title: VPD () Delete Title: VPD (X) Change () Addition Name: HUNT, D ANDREW Name: HUNT, D ANDREW

Address: 2404 S E HUNT BROS RD City-St-Zip: LAKE WALES, FL 33853 City-St-Zip: LAKE WALES, FL 33853

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

 Name:
 MATTESON, JOHN S.,
 Name:
 MATTESON, JOHN S.

 Address:
 EAST HUNT BROS. ROAD
 Address:
 2404 S.E.HUNT BROS. RD.

 City-St-Zip:
 LAKE WALES, FL
 City-St-Zip:
 LAKE WALES, FL
 33898

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: JOHN S MATTESON STD 01/27/2009