

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 287207

Entity Name: L. M. REID & CO., INC.

FILED  
Jan 23, 2008  
Secretary of State

## Current Principal Place of Business:

1579 SW DYER POINT RD.  
PALM CITY, FL 34990 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 889  
PALM CITY, FL 34991

## New Mailing Address:

FEI Number: 59-1116092

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROGAN, JAMES T III  
1579 SW DYER POINT RD  
PALM CITY, FL 34990 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: CCEO ( ) Delete  
Name: BROGAN, JAMES T III  
Address: 1579 SW DYER PT RD  
City-St-Zip: PALM CITY, FL 34990

Title: PD ( ) Delete  
Name: BROGAN IV, JAMES T  
Address: 8084 SE CARLTON ST.  
City-St-Zip: HOBE SOUND, FL 33455

Title: STD ( ) Delete  
Name: BROGAN, MARY E  
Address: 1579 SW DYER PT. RD.  
City-St-Zip: PALM CITY, FL 34990

## 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: MARY E. BROGAN

STD

01/23/2008

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

\_\_\_\_\_  
Date