

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 288382

FILED
Mar 21, 2009
Secretary of State

Entity Name: SUPERIOR MILLWORK COMPANY

Current Principal Place of Business:

501 EAST 27TH STREET
P.O. BOX 3321
JACKSONVILLE, FL 32206

New Principal Place of Business:

501 EAST 27TH STREET
JACKSONVILLE, FL 32206

Current Mailing Address:

501 EAST 27TH STREET
P.O. BOX 3321
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-1086353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLY, FRANCIS J III
501 E 27TH ST
JACKSONVILLE, FL 32206 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: P () Delete
Name: POLLY, FRANCIS J III
Address: 306 HOLLY AVE
City-St-Zip: JACKSONVILLE, FL 32211

Title: S () Delete
Name: POLLY, JENIFER D
Address: 306 HOLLY AVE.
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POLLY, FRANCIS J III
Address: 4945 GLADE HILL ST
City-St-Zip: JACKSONVILLE, FL 32207

Title: S (X) Change () Addition
Name: POLLY, JENIFER D
Address: 4945 GLADE HILL ST
City-St-Zip: JACKSONVILLE, FL 32207

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: JAMES LIPHAM

CPA

03/21/2009

Electronic Signature of Signing Officer or Director

_____ Date