

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 387807

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: JACK MOORE & COMPANY, INC.

## Current Principal Place of Business:

6013 MONTGOMERY AVE  
PENSACOLA, FL 32526 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 37010  
PENSACOLA, FL 325261326

## New Mailing Address:

FEI Number: 59-1351932

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MOORE, WM. JACKIE  
2732 PLEASANT VALLEY DRIVE  
CANTONMENT, FL 32533 US

## Name and Address of New Registered Agent:

MICKI MOORE BAUMERT  
2320 JACK'S BRANCH ROAD  
CANTONMENT, FL 32533 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: MICKI MOORE BAUMERT

01/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MOORE, WM. JACKIE,  
Address: 2732 PLEASANT VALLEY DR  
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete  
Name: MOORE, ELIZABETH M  
Address: 2732 PLEASANT VALLEY DR  
City-St-Zip: CANTONMENT, FL 32533

Title: VP ( ) Delete  
Name: BAUMERT, KEATON C  
Address: 2320 JACKS BRANCH RD  
City-St-Zip: CANTONMENT, FL 32533

Title: T ( ) Delete  
Name: BARNARD, MONICA D  
Address: 3440 SCHIFKO ROAD  
City-St-Zip: CANTONMENT, FL 32533

Title: S ( ) Delete  
Name: BAUMERT, MICKI M  
Address: 2320 JACKS BRANCH ROAD  
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete  
Name: BARNARD, WILLIAM H JR  
Address: 3440 SCHIFKO RD  
City-St-Zip: CANTONMENT, FL 32533

## 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:

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: MICKI MOORE BAUMERT

S

01/05/2009

Electronic Signature of Signing Officer or Director

Date