

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 473523

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: J.J. SEIFERT MACHINE CO., INC.

**Current Principal Place of Business:**

HWY 41 VIDOR AVE.  
P.O. BOX 7055  
SUN CITY, FL 33586

**New Principal Place of Business:**

HWY 41 VIDOR AVE.  
SUN CITY, FL 33586

**Current Mailing Address:**

HWY 41 VIDOR AVE.  
P.O. BOX 7055  
SUN CITY, FL 33586

**New Mailing Address:**

P. O. BOX 7055  
SUN CITY, FL 33586

FEI Number: 59-1613408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AHLEN, PAMELA S  
4204-4212 OLD HWY 41  
SUN CITY, FL 33586 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: PVST ( ) Delete  
Name: AHLEN, PAMELA S  
Address: P O BOX 7055  
City-St-Zip: SUN CITY, FL 33586

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: PAMELA S. AHLEN

PVST

03/02/2009

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

\_\_\_\_\_ Date