

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519429

Entity Name: JOHN P. O'GRADY, INC.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

2809 SOUTH OCEAN BLVD.
HIGHLAND BEACH, FL 334871829

New Principal Place of Business:

Current Mailing Address:

2809 SOUTH OCEAN BLVD.
HIGHLAND BEACH, FL 334871829

New Mailing Address:

FEI Number: 59-1715542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKENSON, DAVID B.
980 N.FEDERAL HWY.,STE.410
BOCA RATON, FL 33432 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: PSV () Delete
Name: BLAKE, JUNE A.
Address: 2727 S OCEAN BLVD #602
City-St-Zip: HIGHLAND BCH., FL

Title: D () Delete
Name: BLAKE, JUNE A.
Address: 2727 S OCEAN BLVD #602
City-St-Zip: HIGHLAND BCH., FL

Title: T () Delete
Name: MCGAHAN, MARGARET MARY C
Address: 3310 S OCEAN BLVD 125
City-St-Zip: HIGHLAND BCH, FL

Title: S () Delete
Name: PORTER, PATRICIA B
Address: 2225 RABBIT HOLLOWE CIR
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP () Delete
Name: BLAKE, AMY M
Address: 301 SE 6TH AVE.
City-St-Zip: POMPANO BEACH, FL 33060

Title: S (X) Delete
Name: SARETSKY, R. VERONIQUE
Address: 3720 S. OCEAN BLVD. #3720
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSV (X) Change () Addition
Name: BLAKE, JUNE A.
Address: 1730 S. FEDERAL HWY #380
City-St-Zip: DELRAY BEACH, FL 33483

Title: D (X) Change () Addition
Name: BLAKE, JUNE A.
Address: 1730 S. FEDERAL HWY. #380
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: T (X) Change () Addition
Name: MCGAHAN, MARGARET MARY C
Address: 3310 S OCEAN BLVD 125
City-St-Zip: HIGHLAND BCH, FL 33487 US

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: JUNE BLAKE

PSV

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date