

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 542612

**FILED**  
**Oct 14, 2009**  
**Secretary of State****Entity Name:** WM. F. SHEFFIELD, INC.**Current Principal Place of Business:**9550 REGENCY SQUARE BLVD  
SUITE 1120  
JACKSONVILLE, FL 32225**New Principal Place of Business:****Current Mailing Address:**9550 REGENCY SQUARE BLVD  
SUITE 1120  
JACKSONVILLE, FL 32225**New Mailing Address:****FEI Number:** 59-1857328**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SHEFFIELD, WILLIAM F.  
13050 ISLEWORTH RIDGE CT  
JACKSONVILLE, FL 32225 US**Name and Address of New Registered Agent:**SHEFFIELD, J HOWARD  
6101 GAZEBO PARK PLACE NORTH  
103  
JACKSONVILLE, FL 32257 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:** J. HOWARD SHEFFIELD

10/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** SHEFFIELD, WILLIAM F.  
**Address:** 13050 ISLEWORTH RIDGE CT  
**City-St-Zip:** JACKSONVILLE, FL 32225**Title:** SD ( ) Delete  
**Name:** HALL, LINDA  
**Address:** 2853 SYNHOFF DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32216**Title:** VD ( ) Delete  
**Name:** LAWHON, KARL E  
**Address:** 1532 HALLIDAY LANE S  
**City-St-Zip:** JACKSONVILLE, FL 32207**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change ( ) Addition  
**Name:** SHEFFIELD, J HOWARD  
**Address:** 6101 GAZEBO PARK PLACE NORTH  
**City-St-Zip:** JACKSONVILLE, FL 32257**Title:** SD (X) Change ( ) Addition  
**Name:** HALL, LINDA  
**Address:** 2853 SYNHOFF DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32216**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:** J. HOWARD SHEFFIELD

PRES

10/14/2009

Electronic Signature of Signing Officer or Director

Date