

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 645218

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: J.H. MCGREGAN & SONS, INC.

**Current Principal Place of Business:**

940 NE INDUSTRIAL BLVD  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

940 NE INDUSTRIAL BLVD  
JENSEN BEACH, FL 34957

**New Mailing Address:**

FEI Number: 59-1955312      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCGREGAN, JAMES H.  
1473 CROTON STREET  
JENSEN BEACH, FL 34957      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: MCGREGAN, JAMES H.  
Address: 1473 CROTON STREET  
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: VP      ( ) Delete  
Name: MCGREGAN, PATRICK J  
Address: 1473 CROTON ST  
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: ST      ( ) Delete  
Name: MCGREGAN, MICHAEL  
Address: 1269 NE OLIVE STREET  
City-St-Zip: JENSEN BEACH, FL 34957 US

**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:

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: MICHAEL MCGREGAN

ST

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date