

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 690287

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: JAMES A. CUMMINGS, INC.

## Current Principal Place of Business:

3575 NW 53 ST  
FT LAUDERDALE, FL 33309

## New Principal Place of Business:

## Current Mailing Address:

3575 NW 53 ST  
FT LAUDERDALE, FL 33309

## New Mailing Address:

FEI Number: 59-2098732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KATZ, MICHAEL D.  
2699 SOUTH BAYSHORE DR., SUITE 700-A  
MIAMI, FL 33133 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: V ( ) Delete  
Name: FEUILLIEZ DE LA, RAYMOND  
Address: 9311 ORANGE GROVE DRIVE #106  
City-St-Zip: FORT LAUDERDALE, FL 33324 US

Title: PC ( ) Delete  
Name: DERRER, WILLIAM R  
Address: 5010 QUAYSIDE TERRACE  
City-St-Zip: MIAMI, FL 33138 US

Title: STV ( ) Delete  
Name: KALIS, PAMELA J  
Address: 5417 NW 108TH WAY  
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: V ( ) Delete  
Name: LANICAULT, MICHAEL F  
Address: 11801 NW 6TH STREET  
City-St-Zip: PLANTATION, FL 33325 US

Title: V ( ) Delete  
Name: BUNNELL, GEOFFREY  
Address: 21218 TURQUOISE WAY  
City-St-Zip: BOCA RATON, FL 33428 US

Title: V ( ) Delete  
Name: MAPHIS, ROBERT L III  
Address: 11745 DELWICK DRIVE  
City-St-Zip: WINDERMERE, FL 34786 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:

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: WILLIAM R. DERRER

PC

01/08/2009

Electronic Signature of Signing Officer or Director

Date