

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 692054

FILED
Feb 29, 2008
Secretary of State

Entity Name: PAT SALMON & SONS OF FLORIDA, INC.

Current Principal Place of Business:

1509 PICKETTEVILLE ROAD
JACKSONVILLE,, FL 32220

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15070 GMF
NO. LITTLE ROCK, AR 72231

New Mailing Address:

FEI Number: 71-0549347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: SALMON, DON G
Address: 3809 ROUNDTOP ROAD
City-St-Zip: NORTH LITTLE ROCK, AR 72117

Title: S/T () Delete
Name: SALMON, TOM R
Address: 3809 ROUNDTOP ROAD
City-St-Zip: NORTH LITTLE ROCK, ZR 72117

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: SALMON, TOM R
Address: 3809 ROUNDTOP ROAD
City-St-Zip: NORTH LITTLE ROCK, AR 72117

Title: VP () Change (X) Addition
Name: SALMON, JIM
Address: 3809 ROUNDTOP ROAD
City-St-Zip: NORTH LITTLE ROCK, AR 72117

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: TOM R SALMON

ST

02/29/2008

Electronic Signature of Signing Officer or Director

_____ Date