2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 698481

Entity Name: MESSER STORES INC.

FILED Mar 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Gurrent Frincipal Flace of Business.	New Fillicipal Flace of Busiless.

145 S HWY 17

EAST PALATKA, FL 32131 US

Current Mailing Address: New Mailing Address:

145 S HWY 17

EAST PALATKA, FL 32131 US

FEI Number: 59-2142453 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LONGHI, VIRGINIA M

109 MYRTLEWOOD PT. RD.

EAST PALATKA, FL 32131 US

MURPHY, VIRGINIA M

109 MYRTLEWOOD PT. RD.

EAST PALATKA, FL 32131 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: VIRGINIA M. MURPHY 03/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STPD () Delete Title: STPD (X) Change () Addition
Name: LONGHI, VIRGINIA MESSE Name: MURPHY, VIRGINIA M
Address: 109 MYRTLEWOOD PT RD Address: 109 MYRTLEWOOD PT RD

 Address:
 109 MYRTLEWOOD PT RD
 Address:
 109 MYRTLEWOOD PT RD

 City-St-Zip:
 EAST PALATKA, FL 32131
 City-St-Zip:
 EAST PALATKA, FL 32131

Title: M () Delete Title: () Change () Addition Name: DARBY, MICHAEL D SR Name:

Address: 106 DARBY ROAD Address: City-St-Zip: PALATKA, FL 32177 City-St-Zip:

 $\label{eq:title:matter} \mbox{Title:} \qquad \mbox{M} \qquad \mbox{() Delete} \qquad \mbox{Title:} \qquad \mbox{M} \qquad \mbox{(X) Change () Addition}$

 Name:
 DARBY, JAMES A JR
 Name:
 DARBY, JAMES A JR

 Address:
 158 W GRANDVIEW DR
 Address:
 158 W GRANDVIEW DR

 City-St-Zip:
 E PALTKA, FL 32131
 City-St-Zip:
 E PALATKA, FL 32131

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: VIRGINIA M. MURPHY PRES 03/30/2009