

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837924

FILED
Apr 17, 2009
Secretary of State

Entity Name: HOSEA O. WEAVER AND SONS, INC.

Current Principal Place of Business:

7450 HOWELLS FERRY RD.
P.O. BOX 8039
MOBILE, AL 366183407

New Principal Place of Business:

7450 HOWELLS FERRY RD.
MOBILE, AL 366183407

Current Mailing Address:

P.O. BOX 8039
MOBILE, AL 36689

New Mailing Address:

FEI Number: 63-0567634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION INFORMATION SERVICES, INC.
1201 HAYES STREET
TALLAHASSEE, FL 32301 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: MATHEWS, HENRY BEN
Address: 130 BEL AIR DR
City-St-Zip: DOTHAN, AL 36303

Title: DP () Delete
Name: WEAVER, PAUL E
Address: 240 SUFFOLK RD
City-St-Zip: MOBILE, AL 36608

Title: V () Delete
Name: MURPHY III, JOHN E
Address: 1613 WOODS POINTE CIR
City-St-Zip: MOBILE, AL 36609

Title: TS () Delete
Name: SHELLEY, S. MARK
Address: 6741 ROLLING GREEN DR.
City-St-Zip: MOBILE, AL 36695

Title: VP () Delete
Name: WEAVER, RAMONA G
Address: 240 SUFFOLK RD
City-St-Zip: MOBILE, AL 36608

Title: VP () Delete
Name: TILLERY, R. LEWIS
Address: 6126 PHERIN WOODS CRT
City-St-Zip: MOBILE, AL 36608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WEAVER, MICHAEL P
Address: 1305 DUNBROOKE COURT
City-St-Zip: MOBILE, AL 36695

Title: DP (X) Change () Addition
Name: WEAVER, PAUL E
Address: 240 SUFFOLK RD
City-St-Zip: MOBILE, AL 36608

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: PAUL E WEAVER

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date