

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844152

FILED
Apr 24, 2009
Secretary of State

Entity Name: MARVIN F. POER AND COMPANY

Current Principal Place of Business:

12700 HILLCREST ROAD
STE. 125
DALLAS, TX 75230 US

New Principal Place of Business:

Current Mailing Address:

12700 HILLCREST ROAD
STE. 125
DALLAS, TX 75230 US

New Mailing Address:

FEI Number: 75-1533973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAO SERVICES, INC.
2731 EXECUITVE PARK DR STE 4
WESTON, FL 33331 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: CD () Delete
Name: POER, MARVIN F
Address: 12700 HILLCREST RD, STE 125
City-St-Zip: DALLAS, TX 75230

Title: P () Delete
Name: DUBOIS, WILLIAM L
Address: 12700 HILLCREST RD, STE 125
City-St-Zip: DALLAS, TX 75230

Title: VP () Delete
Name: MCBRIDE, KATHRYN
Address: 12700 HILLCREST RD, STE 125
City-St-Zip: DALLAS, TX 75230

Title: VP () Delete
Name: COLEMAN, WILLIAM
Address: 930 WOODCOOK RD. STE 200
City-St-Zip: ORLANDO, FL 32803

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:

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: KATHRYN MCBRIDE

VP

04/24/2009

Electronic Signature of Signing Officer or Director

Date