

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2008 8:00 am
Secretary of State

03-25-2008 90007 020 ***150.00

DOCUMENT # 851707	
1. Entity Name MOORE-HANDLEY, INC.	

Principal Place of Business 3140 PELHAM PKWY PELHAM, AL 35124 US	Mailing Address PO BOX 2607 BIRMINGHAM, AL 35202 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40051001



01072008 Chg-P CR2E034 (12/06)

4. FEI Number 63-0819773		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RILEY, WILLIAM 16697 CAPTIVA DR CAPTIVA, FL 33924 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHMCEO ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO MERCER, GARY 2543 ELIZABETH DR PELHAM, AL 35124 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STUBBS, MICHAEL B 777 3RD AVE 18TH FLOOR NEW YORK, NY 10017 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STUBBS, MICHAEL B. 420 LEXINGTON AVE., STE. 2650 NEW YORK, N.Y. 10170 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALMER, MICHAEL FLAT 15 55 PORTLAND PLACE LONDON W1B 1QI, ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO GAINES, MICHAEL J 5206 CEDAR TRACE CIRCLE HOOVER, AL 35244 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pceo ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO SCHINFANELLA, TOMMY 3140 PELHAM PKWY PELHAM, AL 35124 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Schifanella, Tommy ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/08

Date

205-663-8256

Daytime Phone #