

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851707

Entity Name: MOORE-HANDLEY, INC.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

3140 PELHAM PKWY
PELHAM, AL 35124 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2607
BIRMINGHAM, AL 35202 US

New Mailing Address:

FEI Number: 63-0819773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT 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: CHMC () Delete
Name: RILEY, WILLIAM
Address: 16697 CAPTIVA DR
City-St-Zip: CAPTIVA, FL 33924

Title: D () Delete
Name: STUBBS, MICHAEL B
Address: 420 LEXINGTON AVE, STE. 2650
City-St-Zip: NEW YORK, NY 10170

Title: D () Delete
Name: PALMER, MICHAEL
Address: FLAT 15 55 PORTLAND PLACE
City-St-Zip: LONDON WIB IQI,

Title: PCOO () Delete
Name: GAINES, MICHAEL J
Address: 5206 CEDAR TRACE CIRCLE
City-St-Zip: HOOVER, AL 35244

Title: CFO () Delete
Name: SCHIFANELLA, TOMMY
Address: 3140 PELHAM PKWY
City-St-Zip: PELHAM, AL 35124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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: THOMAS J. SCHIFANELLA

SEC

04/23/2009

Electronic Signature of Signing Officer or Director

Date