

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002284

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: SCIENCE AND MANAGEMENT RESOURCES, INC.

## Current Principal Place of Business:

2801 OLIVE ROAD  
PENSACOLA, FL 32514

## New Principal Place of Business:

## Current Mailing Address:

2801 OLIVE ROAD  
PENSACOLA, FL 32514

## New Mailing Address:

FEI Number: 52-1134414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FROMMEL, ELEANOR L  
5340 SUSSEX LANE  
PACE, FL 32571 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: P ( ) Delete  
Name: MCKEE, LARRY E  
Address: 5772 TAMARACK DRIVE  
City-St-Zip: PACE, FL 32571

Title: VP ( ) Delete  
Name: FROMMEL, ELEANOR  
Address: 5340 SUSSEX LANE  
City-St-Zip: PACE, FL 32571

Title: ST (X) Delete  
Name: MCKEE, GLORIA  
Address: 5772 TAMARACK DR  
City-St-Zip: PACE, FL 32571

Title: VP ( ) Delete  
Name: RIFFENBURG, SHEREE  
Address: 7745 DEBORAH COURT  
City-St-Zip: PENSACOLA, FL 32514

## 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: ELEANOR FROMMEL

VP

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date