

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005251

FILED
Mar 11, 2009
Secretary of State

Entity Name: JON BARRY AND ASSOCIATES INC.

Current Principal Place of Business:

216 LE PHILLIP COURT
CONCORD, NC 28025

New Principal Place of Business:

Current Mailing Address:

PO BOX 127
CONCORD, NC 28026

New Mailing Address:

FEI Number: 56-1543902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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: P () Delete
Name: GANN, BRYLAN D
Address: 216 LEPHILLIP COURT
City-St-Zip: CONCORD, NC 28025

Title: S () Delete
Name: MCCALL, REGENIA C
Address: 216 LEPHILLIP COURT
City-St-Zip: CONCORD, NC

Title: CD () Delete
Name: MCCALL, JON B
Address: 216 LEPHILLIP COURT
City-St-Zip: CONCORD, NC

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: MCCALL, REGENIA C
Address: 216 LEPHILLIP COURT
City-St-Zip: CONCORD, NC 28025

Title: CD (X) Change () Addition
Name: MCCALL, JON B
Address: 216 LEPHILLIP COURT
City-St-Zip: CONCORD, NC 28025

Title: CIO () Change (X) Addition
Name: CRAINSHAW, JOEL S
Address: 216 LEPHILLIP COURT
City-St-Zip: CONCORD, NC 28025

Title: COO () Change (X) Addition
Name: BUTTS, SCOTT R
Address: 216 LEPHILLIP COURT
City-St-Zip: CONCORD, NC 28025

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: BRYLAN D GANN

P

03/11/2009

Electronic Signature of Signing Officer or Director

_____ Date