

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002389

FILED
Apr 13, 2009
Secretary of State

Entity Name: MARTS & LUNDY, INCORPORATED

Current Principal Place of Business:

1200 WALL STREET WEST
LYNDHURST, NJ 07071

New Principal Place of Business:

Current Mailing Address:

1200 WALL STREET WEST
LYNDHURST, NJ 07071

New Mailing Address:

FEI Number: 22-2328092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 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: D () Delete
Name: MISKURA, ROBERT C
Address: 240 ORIENT WAY
City-St-Zip: RUTHERFORD, NJ 07070

Title: VPT () Delete
Name: JOLLY, RICHARD T
Address: 11 MCCARTHY ROAD
City-St-Zip: CHADDS FORD, PA 19317

Title: S () Delete
Name: AVERY, LAURA J
Address: 264 LUCILLE AVENUE
City-St-Zip: NORFOLK, VA 23504

Title: D () Delete
Name: MCCLINTOCK, BRUCE
Address: 191 OLD MAIN STREET
City-St-Zip: NEW LONDON, NH 03257

Title: P () Delete
Name: FELLOWS, DONALD M
Address: 8896 CALLE TRAGAR
City-St-Zip: SAN DIEGO, CA 92129

Title: S () Delete
Name: SUGGS, DROSLYN
Address: 2018 ORANGE WAY
City-St-Zip: ANTIOCH, CA 94531

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
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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: ROBER C. MISKURA

VP

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date