

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006151

FILED
Jan 16, 2009
Secretary of State

Entity Name: SAULSBURY INDUSTRIES, INC.

Current Principal Place of Business:

5308 ANDREWS HIGHWAY
ODESSA, TX 79762

New Principal Place of Business:

Current Mailing Address:

5308 ANDREWS HIGHWAY
ODESSA, TX 79762

New Mailing Address:

FEI Number: 75-2969084

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: PCD () Delete
Name: SAULSBURY, CHARLES R
Address: 6400 MONTANA
City-St-Zip: ODESSA, TX 79762

Title: V () Delete
Name: SAULSBURY, AMELIA C
Address: 6400 MONTANA
City-St-Zip: ODESSA, TX 79762

Title: ST () Delete
Name: ZUGG, AMELIA DIANNE
Address: 5901 MONTANA
City-St-Zip: ODESSA, TX 79762

Title: D () Delete
Name: MOLINAR, LARRY
Address: 804 CLAYMOOR
City-St-Zip: ODESSA, TX 79764

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

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:

Title: D () Change (X) Addition
Name: FRAZIER, TRACY
Address: 450 NE 1500
City-St-Zip: ANDREWS, TX 79714

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: TRACY FRAZIER

D

01/16/2009

Electronic Signature of Signing Officer or Director

Date