2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F64733

Entity Name: FRANK AND SONS MOVING AND STORAGE, INC.

FILED Jan 27, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|

C/O MARTHA JEAN GRAVEDONI
1117 S E 12TH PLACE
CAPE CORAL, FL 339903029

C/O MARTHA JEAN GRAVEDONI
1117 S E 12TH PLACE
CAPE CORAL, FL 339903029 US

Current Mailing Address: New Mailing Address:

C/O MARTHA JEAN GRAVEDONI
1117 S E 12TH PLACE
CAPE CORAL, FL 339903029

C/O MARTHA JEAN GRAVEDONI
1117 S E 12TH PLACE
CAPE CORAL, FL 339903029 US

FEI Number: 59-2180253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRAVEDONI, MARTHA JEAN 1117 SE 12TH PLACE CAPE CORAL, FL 33990 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GRAVEDONI, MARTHA J., GRAVEDONI, MARTHA J., Name: Name: 3813 SE 19TH AVE 3813 SE 19TH AVE Address: Address: City-St-Zip: CAPE CORAL, FL 00000, City-St-Zip: CAPE CORAL, FL 33904 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 GRAVEDONI, JAMES F.,
 Name:
 GRAVEDONI, JAMES F.,

 Address:
 3813 SE 19TH AVE
 Address:
 3813 SE 19TH AVE

 City-St-Zip:
 CAPE CORAL, FL 00000,
 City-St-Zip:
 CAPE CORAL, FL 33904 US

Title: V () Delete Title: V (X) Change () Addition

 Name:
 GRAVEDONI, JAMES W.,
 Name:
 GRAVEDONI, JAMES W.,

 Address:
 5216 VERSAILLE CT
 Address:
 5216 VERSAILLE CT

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33904 US

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: JAMES W GRAVEDONI V 01/27/2009