

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F80182

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: MITCHELL TRANSMISSION SUPPLY CO INC.

## Current Principal Place of Business:

% JAMES EARL MITCHELL, JR.  
2517 LIBERTY STREET  
JACKSONVILLE, FL 32206

## New Principal Place of Business:

2517 LIBERTY STREET  
JACKSONVILLE, FL 32206

## Current Mailing Address:

% JAMES EARL MITCHELL, JR.  
2517 LIBERTY STREET  
JACKSONVILLE, FL 32206

## New Mailing Address:

2517 LIBERTY STREET  
JACKSONVILLE, FL 32206

FEI Number: 59-2185377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, JAMES E. JR.  
2517 LIBERTY STREET  
JACKSONVILLE, FL 32206 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: MITCHELL, JAMES E JR,  
Address: 5051 RUE ST  
City-St-Zip: JACKSONVILLE, FL

Title: VS ( ) Delete  
Name: MITCHELL, DEBORAH J.,  
Address: 5051 RUE STREET  
City-St-Zip: JACKSONVILLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MITCHELL, JAMES E JR,  
Address: 5051 RUE ST  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VS (X) Change ( ) Addition  
Name: MITCHELL, DEBORAH J.,  
Address: 5051 RUE STREET  
City-St-Zip: JACKSONVILLE, FL 32258

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 E. MITCHELL

P

01/29/2009

Electronic Signature of Signing Officer or Director

Date