

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002555

FILED
Jan 06, 2010
Secretary of State

Entity Name: ERGON, INC.

Current Principal Place of Business:

2829 LAKELAND DR
JACKSON, MS 39232 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1308
JACKSON, MS 39215 US

New Mailing Address:

FEI Number: 64-0503423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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: CD
Name: LAMPTON, LESLIE B
Address: 2829 LAKELAND DR.
City-St-Zip: JACKSON, MS 39232

Title: VST
Name: STONE, KATHRYN W
Address: 2829 LAKELAND DR.
City-St-Zip: JACKSON, MS 39232

Title: PD
Name: LAMPTON, LESLIE B III
Address: 2829 LAKELAND DR.
City-St-Zip: JACKSON, MS 39232

Title: PD
Name: LAMPTON, LEE C
Address: 2829 LAKELAND DR.
City-St-Zip: JACKSON, MS 39232

Title: PD
Name: LAMPTON, WILLIAM W
Address: 2829 LAKELAND DR.
City-St-Zip: JACKSON, MS 39232

Title: PD
Name: LAMPTON, ROBERT H
Address: 2829 LAKELAND DR.
City-St-Zip: JACKSON, MS 39232

I hereby 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 all other like empowered.

SIGNATURE: KATHRYN W STONE

VST

01/06/2010

Electronic Signature of Signing Officer or Director

_____ Date