

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003217

Entity Name: F.J. O'HARA & SONS INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

1301 NW 89 CT.
SUITE 200
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

1301 NW 89 CT.
SUITE 200
DORAL, FL 33172

New Mailing Address:

FEI Number: 04-1687520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'HARA, SHAWN
16437 SW 22 STREET
MIRAMAR, FL 33027 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: O'HARA, SHAWN
Address: 16437 SW 22 STREET
City-St-Zip: MIRAMAR, FL 33027

Title: VD () Delete
Name: DIPESA, CHARLES
Address: 39 LINCOLN
City-St-Zip: HINGHAM, MA 02043

Title: S () Delete
Name: KERR, KEVIN
Address: 546 E BROADWAY
City-St-Zip: S BOSTON, MA 02127

Title: PTD () Delete
Name: O'BRIEN, CHARLES
Address: 635 HIGH ST
City-St-Zip: WALPOLE, MA 02081

Title: D () Delete
Name: O'HARA, FRANCIS
Address: 15 MOUNTAIN ST
City-St-Zip: CAMDEN, ME 04843

Title: D () Delete
Name: KOPLOVSKY, WILLIAM
Address: P.O. BOX 150
City-St-Zip: HINGHAM, MA 02043

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: () 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: CHARLES O'BRIEN

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date