

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002793

FILED
Mar 25, 2009
Secretary of State

Entity Name: MILLBROOK DISTRIBUTION SERVICES INC.

Current Principal Place of Business:

401 HWY 43 E. & COTTONWOOD RD
HARRISON, AR 72602

New Principal Place of Business:

401 HWY 43 E. & COTTONWOOD RD
HARRISON, AR 72602 US

Current Mailing Address:

401 HWY 43 E. & COTTONWOOD RD
HARRISON, AR 72602

New Mailing Address:

401 HWY 43 E. & COTTONWOOD RD
HARRISON, AR 72602 US

FEI Number: 41-0754020

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: VP () Delete
Name: ANTONELLI, RICHARD
Address: 260 LAKE ROAD
City-St-Zip: DAYVILLE, CT 06248

Title: VP () Delete
Name: ATWOOD, DANIEL V
Address: 260 LAKE RD
City-St-Zip: DAYVILLE, CT 06248

Title: VPTS () Delete
Name: SHAMBER, MARK E
Address: 260 LAKE ROAD
City-St-Zip: DAYVILLE, CT 06248

Title: CEO (X) Delete
Name: FUNK, MICHAEL S
Address: 260 LAKE ROAD
City-St-Zip: DAYVILLE, CT 06248

Title: AS (X) Delete
Name: CAMERON, COLBY
Address: 260 LAKE ROAD
City-St-Zip: DAYVILLE, CT 06248

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: DANIEL,
Address: 260 LAKE RD
City-St-Zip: DAYVILLE, CT 06241 US

Title: T (X) Change () Addition
Name: MARK,
Address: 260 LAKE ROAD
City-St-Zip: DAYVILLE, CT 06241 US

Title: D (X) Change () Addition
Name: SPINNER, STEVEN L
Address: 260 LAKE ROAD
City-St-Zip: DAYVILLE, CT 06241 US

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: MARK E SHAMBER

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03/25/2009

Electronic Signature of Signing Officer or Director

Date