

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G76345

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: COMMERCIAL CONVEYOR, INC.

**Current Principal Place of Business:**

9416 BUNTING LANE  
FORT PIERCE, FL 34951

**New Principal Place of Business:**

**Current Mailing Address:**

4828 N KINGS HWY  
PMB 230  
FORT PIERCE, FL 349512203

**New Mailing Address:**

FEI Number: 59-2354210      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CHARBONEAU, BRIAN, L  
9416 BUNTING LANE  
FORT PIERCE, FL 34951      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: DV      ( ) Delete  
Name: CHARBONEAU, BRIAN, L  
Address: 4828 N KINGS HWY PMB 230  
City-St-Zip: FORT PIERCE, FL 349512203

Title: PD      ( ) Delete  
Name: CHARBONEAU, KATHLEEN  
Address: 4828 N KINGS HWY PMB 230  
City-St-Zip: FORT PIERCE, FL 349512230

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: K. E. CHARBONEAU

P/D

04/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date