2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10088

FILED Jan 06, 2009 Secretary of State

Entity Name: MFM ENVIRONMENTAL COMPANY

Current Principal Place of Business:		New Principal Place of Business:		
233 SW :	33RD RD			
	L 34474459	US		
Current Mailing Address:		ess:	New Mailing Address:	
O BOX : OCALA, F	367 L 34478367	US		
El Number	: 59-2473572	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	WHITFIELD 33RD RD			
	L 34474 US			
CALA, F			purpose of changing its registere	ed office or registered agent, or both,
CALA, F	e named entity e of Florida. RE:	y submits this statement for the		ed office or registered agent, or both,
OCALA, Fine above the States	e named entity e of Florida. RE: Electro	y submits this statement for the points statem		ed office or registered agent, or both, Date
OCALA, Fine above the States	e named entity e of Florida. RE: Electro	y submits this statement for the		
OCALA, For the above the State	e named entity e of Florida. RE: Electro	y submits this statement for the point of the point Signature of Registered Aging Trust Fund Contribution ().	ent	
OCALA, For the above the State	e named entity e of Florida. RE: Electro mpaign Financi S AND DIRE	y submits this statement for the point Signature of Registered Aging Trust Fund Contribution (). CTORS: () Delete M., JR., H ST	ent	Date
CALA, For the above in the State SIGNATU SIGNATU SIECTION Ca DFFICER ittle: lame: ddress:	e named entity e of Florida. RE: Electro mpaign Financi S AND DIRE CPD PALMER, W. 2241 SE 25T OCALA, FL 3	y submits this statement for the poinc Signature of Registered Aging Trust Fund Contribution (). CTORS: () Delete M., JR., H ST 34471 () Delete RGARET, H ST.	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: W. M. PALMER, JR. P 01/06/2009