2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# H38894

Entity Name: MAC'S MEAT MARKET,INC.

Current Principal Place of Business:

BOX 899
WINTER HAVEN, FL 33882

New Principal Place of Business:

Current Mailing Address:

1277 1ST ST. S
WINTER HAVEN, FL 33880 US

New Mailing Address:

FEI Number: 59-2502148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHILTON, CHARLES R
99 SIXTH STREET, S.W.
WINTER HAVEN, FL 33883 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:	DAS	( ) Delete
Name:	CHILTON, CHARLES R	
Address:	99 SIXTH STREET, S.W.	
City-St-Zip:	WINTER HAVEN, FL	
Title:	D	( ) Delete
Name:	SATERBO, STEPHEN	
Address:	302 PROGRESS RD	
City-St-Zip:	AUBURNDALE, FL	
Title:	D	( ) Delete
Name:	SATERBO, BRYAN N	
Address:	302 PROGRESS RD	
City-St-Zip:	AUBURNDALE, FL	
Title:	VP	( ) Delete
Name:	MCCLELLAND, GREGORY	
Address:	1309 HIDDEN CREK COURT	
City-St-Zip:	WINTER HAVEN, FL 33880	
Title:	VP	( ) Delete
Name:	ELKINS, BEVERLY R	
Address:	4300 LAKE HANCOCK RD	
City-St-Zip:	LAKELAND, FL 33813	
Title:	P	( ) Delete
Name:	MCCLELLAND, AUDREY M	
Address:	4925 ELAM RD	
City-St-Zip:	LAKELAND, FL 33813	

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: AUDREY MCCLELLAND P 01/19/2009

Electronic Signature of Signing Officer or Director — Date