

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J17810

FILED  
Jan 05, 2010  
Secretary of State

**Entity Name:** THE MONTFORT HELM COMPANY OF FLORIDA, INC.

**Current Principal Place of Business:**

% WILLIAM MONTFORT HELM  
1221 HARBOR DR.  
DELRAY BCH., FL 334837159

**New Principal Place of Business:**

% WILLIAM MONTFORT HELM  
1221 HARBOR DR.  
DELRAY BCH., FL 334837159

**Current Mailing Address:**

% WILLIAM MONTFORT HELM  
1221 HARBOR DR.  
DELRAY BCH., FL 334837159

**New Mailing Address:**

% WILLIAM MONTFORT HELM  
1221 HARBOR DR.  
DELRAY BCH., FL 334837159

**FEI Number:** 59-2685523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HELM, WILLIAM MONTFORT  
1221 HARBOR DR.  
DELRAY BEACH, FL 33483 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:** DP  
**Name:** HELM, WILLIAM MONTFORT  
**Address:** 1221 HARBOR DR  
**City-St-Zip:** DELRAY BCH, FL 33483

**Title:** V  
**Name:** HELM, CAROLYN J.  
**Address:** 1221 HARBOR DR  
**City-St-Zip:** DELRAY BCH, FL 33483

I hereby 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 all other like empowered.

**SIGNATURE:** WM. MONTFORT HELM

DP

01/05/2010

Electronic Signature of Signing Officer or Director

Date