

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J27906

FILED
Mar 20, 2009
Secretary of State

Entity Name: JOHN FITZGERALD, INC.

Current Principal Place of Business:

JOHN FITZGERALD INC
P.O. BOX 655
SANFORD, FL 32772 US

New Principal Place of Business:

JOHN FITZGERALD INC
412 E MATTIE ST
SANFORD, FL 32773 US

Current Mailing Address:

JOHN FITZGERALD INC
P.O. BOX 655
SANFORD, FL 32772 US

New Mailing Address:

FEI Number: 59-2702353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZGERALD, JOHN
2417 YALE AVENUE
SANFORD, FL 32771 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: PD () Delete
Name: FITZGERALD, JOHN
Address: 611 FAULKNER RD.- PO BOX 655
City-St-Zip: ORLANDO, FL 32773

Title: V () Delete
Name: GARDNER, MICHAEL
Address: 7767 COMPASS DR.- PO BOX 655
City-St-Zip: ORLANDO, FL 32773

Title: T () Delete
Name: GARDNER, JULIE
Address: 7767 COMPASS DR.-PO BOX 655
City-St-Zip: ORLANDO, FL 32773

Title: VP () Delete
Name: CASTLE, ROBERT
Address: 2611 FAULKNER RD.-PO BOX 655
City-St-Zip: ORLANDO, FL 32773

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:

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: JOHN FITZGERALD

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date