

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K47859

Entity Name: T.L. MAXWELL CO., INC.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

STATE ROAD 267 SOUTH
P O DRAWER 1648
QUINCY, FL 32353

New Principal Place of Business:

Current Mailing Address:

STATE ROAD 267 SOUTH
P O DRAWER 1648
QUINCY, FL 32353

New Mailing Address:

FEI Number: 59-2916107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHAFFEY, SUSANNE B
1084 PAT THOMAS PKWY
QUINCY, FL 32351 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 () Delete
Name: MAHAFFEY, SUSANNE B
Address: 1084 PAT THOMAS PKWY
City-St-Zip: QUINCY, FL 32351

Title: ST () Delete
Name: RIVERA, RICHARD J
Address: P.O. BOX 1648
City-St-Zip: QUINCY, FL 32351

Title: VP () Delete
Name: MAXWELL, ROBERT H. J, R.
Address: P.O. BOX 1648 NA
City-St-Zip: QUINCY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MAXWELL, ROBERT H. J, R.
Address: P.O. BOX 1648
City-St-Zip: QUINCY, FL

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSANNE B, MAHAFFEY

PRES

01/09/2007

Electronic Signature of Signing Officer or Director

Date