

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K72194

Entity Name: P & M PLASTICS, INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

280 NW COMMERCIAL CIR
KEYSTONE HEIGHTS, FL 32656 US

New Principal Place of Business:

7333-6 KYLE STREET
KEYSTONE HEIGHTS, FL 32656 US

Current Mailing Address:

PO BOX 2026
KEYSTONE HEIGHTS, FL 32656 US

New Mailing Address:

FEI Number: 59-2988477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, THOMAS H
280 NW COMMERCIAL CIR
KEYSTONE HEIGHTS, FL 32656 US

Name and Address of New Registered Agent:

MORRIS, THOMAS H
7333-6 KYLE STREET
KEYSTONE HEIGHTS, FL 32656 US

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: _____ 03/30/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORRIS, THOMAS H
Address: 7610 GRAND MESA CIR.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: VP () Delete
Name: POWELL, BARBARA J
Address: 10428 BIGTREE CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32257

Title: S () Delete
Name: MORRIS, GLENDA C
Address: 7610 GRAND MESA CIR.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORRIS, THOMAS H
Address: 6199 HUNTER AVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: VP (X) Change () Addition
Name: POWELL, BARBARA J
Address: 5331 OXFORD GABLE LANE EAST
City-St-Zip: JACKSONVILLE, FL 32257

Title: S (X) Change () Addition
Name: MORRIS, GLENDA C
Address: 6199 HUNTER AVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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: THOMAS H MORRIS P 03/30/2009
Electronic Signature of Signing Officer or Director Date