2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2009
Secretary of State

DOCUMENT# K95272

Entity Name: MAIL PROCESSING ASSOCIATES, INC.

Current Principal Place of Business:

430 N. WABASH AVE.
LAKELAND, FL 33815 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3933
LAKELAND, FL 33802 US

New Mailing Address:

FEI Number: 59-2951736 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YELVINGTON, ROBERT
430 N. WABASH AVE.
LAKELAND, FL 33815 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: YELVINGTON, ROBERT
Address: 7022 CATHERINE DR
City-St-Zip: LAKELAND, FL 33810

Title: DV ( ) Delete
Name: YELVINGTON, TERESA
Address: 7022 CATHERINE DR
City-St-Zip: LAKELAND, FL 33810

Title: DT ( ) Delete
Name: YELVINGTON, TERESA
Address: 7022 CATHERINE DR
City-St-Zip: LAKELAND, FL 33810

Title: DS ( ) Delete
Name: HUBBARD, RICHARD
Address: 1602 LEHALL SQUARE N
City-St-Zip: LAKELAND, FL 33810

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: TERESA YELVINGTON DV 06/22/2009

Electronic Signature of Signing Officer or Director Date