

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90443

FILED
Apr 24, 2008
Secretary of State

Entity Name: TREVOR-MARTIN CORPORATION

Current Principal Place of Business:

4190 B 112TH TERRACE NORTH
CLEARWATER, FL 33762 US

New Principal Place of Business:

100 BLUFFVIEW DRIVE
602A
BELLEAIR BLUFFS, FL 33770 US

Current Mailing Address:

125 COMMERCIAL DR
MOORESVILLE, NC 28115 US

New Mailing Address:

FEI Number: 59-3026647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORZONI, JOHN T
4190 112TH TERRACE NORTH
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

BORZONI, JOHN T
100 BLUFFVIEW DRIVE
602A
BELLEAIR BLUFFS, FL 33770 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: _____

Electronic Signature of Registered Agent

04/24/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: BORZONI, JOHN T
Address: 149 ECLIPSE WAY
City-St-Zip: MOORESVILLE, NC 28117 US

Title: VSD () Delete
Name: BINDUS, SHEILA A
Address: 165 PINK ORCHARD DR
City-St-Zip: MOORESVILLE, NC 28115 US

Title: T () Delete
Name: BORZONI, ELIZABETH H
Address: 149 ECLIPSE WAY
City-St-Zip: MOORESVILLE, NC 28117 US

Title: D (X) Delete
Name: GALLAGHER, MARY K
Address: 672 POINSETTIA RD
City-St-Zip: BELLEAIR, FL 33756 US

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 T. BORZONI

Electronic Signature of Signing Officer or Director

P

04/24/2008

Date