

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M89600

Entity Name: PROP M CORP.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

P. O. BOX 1262
FT. MYERS, FL 33902 US

New Principal Place of Business:

3833 E RIVER DR, P. O. BOX 1262
FT. MYERS, FL 33916 US

Current Mailing Address:

C/O JEFFREY C. LEDWARD PA
6249-B PRESIDENTIAL
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 65-0112735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKE, HARALD
3833 E. RIVER DR.
FORT MYERS, FL 33916 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: DPST () Delete
Name: BURKE, HARALD,
Address: 3833 E RIVER DR, P O BOX 1252
City-St-Zip: FT. MYERS, FL 339163390

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HARALD BURKE

P

01/08/2009

Electronic Signature of Signing Officer or Director

_____ Date