

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000051940

Entity Name: FERGUSON MARTIN ASSOCIATES, INC.

FILED  
Apr 21, 2009  
Secretary of State

## Current Principal Place of Business:

343 STONEHURST PARKWAY  
ST. AUGUSTINE, FL 32092

## New Principal Place of Business:

## Current Mailing Address:

343 STONEHURST PARKWAY  
ST. AUGUSTINE, FL 32092

## New Mailing Address:

FEI Number: 59-3651374      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FERGUSON, JAMES E  
13426 LAKE TURNBERRY CIRCLE  
ORLANDO, FL 32828      US

## Name and Address of New Registered Agent:

FERGUSON, JAMES E  
343 STONEHURST PARKWAY  
ST. AUGUSTINE, FL 32092      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

04/21/2009

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FERGUSON, JAMES E  
Address: 343 STONEHURST PARKWAY  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D ( ) Delete  
Name: FERGUSON, PATRICIA R  
Address: 343 STONEHURST PARKWAY  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D ( ) Delete  
Name: RETHER, PATRICIA A  
Address: 343 STONEHURST PARKWAY  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D ( ) Delete  
Name: FERGUSON, JAMES A  
Address: 343 STONEHURST PARKWAY  
City-St-Zip: ST. AUGUSTINE, FL 32092

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: REYHER, PATRICIA A  
Address: 343 STONEHURST PARKWAY  
City-St-Zip: ST. AUGUSTINE, FL 32092

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: JAMES E. FERGUSON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DIR

04/21/2009

\_\_\_\_\_  
Date