

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051403

Entity Name: MCLAFFERTY & SONS INC.

FILED
Mar 14, 2007
Secretary of State

Current Principal Place of Business:

1361 NEWTON ST.
PORT CHARLOTTE, FL 33707

New Principal Place of Business:

1720 EL JOBEAN RD
212
PORT CHARLOTTE, FL 33948

Current Mailing Address:

1361 NEWTON ST.
PORT CHARLOTTE, FL 33707

New Mailing Address:

1361 NEWTON ST.
PORT CHARLOTTE, FL 33952

FEI Number: 59-3718587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC LAFFERTY, WILLIAM
1361 NEWTON ST.
PORT CHARLOTTE, FL 33707 US

Name and Address of New Registered Agent:

MC LAFFERTY, WILLIAM J V/P
1361 NEWTON STREET
PORT CHARLOTTE, FL 33952 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: WILLIAM J MCLAFFERTY

03/14/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCLAFFERTY, WILLIAM
Address: 1361 NEWTON STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: V () Delete
Name: MCLAFFERTY, MARYANNE
Address: 1361 NEWTON STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: V () Delete
Name: BAGGOTT, JAMES
Address: 1361 NEWTON ST.
City-St-Zip: PORT CHARLOTTE, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCLAFFERTY, MARYANNE H PRES
Address: 1361 NEWTON STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: V (X) Change () Addition
Name: MCLAFFERTY, WILLIAM J V/P
Address: 1361 NEWTON STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: V (X) Change () Addition
Name: BAGGOTT, JAMES L V/P
Address: 5607 CHOCTAW TERRACE
City-St-Zip: PORT CHARLOTTE, FL 33987

I hereby certify that the information supplied with this filing does not qualify for the 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: MARYANNE MCLAFFERTY

PRES

03/14/2007

Electronic Signature of Signing Officer or Director

Date