

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051403

Entity Name: MCLAFFERTY & SONS INC.

FILED
Feb 05, 2008
Secretary of State

Current Principal Place of Business:

1720 EL JOBEAN RD
212
PORT CHARLOTTE, FL 33948

Current Mailing Address:

1361 NEWTON ST.
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

17783 TOLEDO BLADE BLVD.
A
PORT CHARLOTTE, FL 33948

New Mailing Address:

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 J V/P
1361 NEWTON STREET
PORT CHARLOTTE, FL 33952 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: PD () Delete
Name: MCLAFFERTY, MARYANNE H PRES
Address: 1361 NEWTON STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARYANNE MCLAFFERTY

PRES

02/05/2008

Electronic Signature of Signing Officer or Director

Date