

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000072339

Entity Name: FULL METAL TIEDOWN, INC.

FILED
Aug 11, 2009
Secretary of State

Current Principal Place of Business:

11046 MANDARIN STATION DR. W.
JACKSONVILLE, FL 32257

New Principal Place of Business:

10634 SPRING VIEW RD.
JACKSONVILLE, FL 32221

Current Mailing Address:

11046 MANDARIN STATION DR. W.
JACKSONVILLE, FL 32257

New Mailing Address:

10634 SPRING VIEW RD.
JACKSONVILLE, FL 32221

FEI Number: 59-3734507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCKENDREE, CHARLENE H
11046 MANDARIN STATION DR. W.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

SHEARS, DAVID A
10634 SPRING VIEW RD.
JACKSONVILLE, FL 32221 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: DAVID A. SHEARS

08/11/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHEARS, DAVID A
Address: 11046 MANDARIN STATION DR., W
City-St-Zip: JACKSONVILLE, FL 32257

Title: S (X) Delete
Name: MCKENDREE, CHARLENE H
Address: 11046 MANDARIN STATION DR. W
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEARS, DAVID A
Address: 10634 SPRING VIEW RD.
City-St-Zip: JACKSONVILLE, FL 32221

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: DAVID A SHEARS

P

08/11/2009

Electronic Signature of Signing Officer or Director

Date