2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000031541

Entity Name: CHARLES A MOORE, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6104 WEBB ROAD STE 306				8345 SANDSTONE LAKE DRIVE STE 102			
TAMPA, FL	_ 33615			TAMPA, FL	_ 33615		
Current Mailing Address:				New Mailing Address:			
PO BOX 26 TAMPA, FL							
FEI Number:	56-2332772	FEI Number Applied For()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:		Name and	Address of I	New Registered Agent:	
6104 WÉBI 306 TAMPA, FL The above	_ 33615 US	submits this statement for the pu	urpose o	8345 SAND 102 TAMPA, FL	CHARLES A DISTONE LAK 33615 US ts registered of		oth,
in the State							
SIGNATUR	RE: CHARLE		m.t			04/28/2009	_
.		nic Signature of Registered Age	ΠL			Date	
Election Can	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D (CHLARRVALLO 305 OAKLAND BELLMAWR, N	AVE		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D (MOORE, JANE 106 S HAG AVI TAMPA, FL 33	E # 109		Title: Name: Address: City-St-Zip:	D (X MOORE, JANE 106 S HALE AV TAMPA, FL 33	VE #109	
Title: Name: Address: City-St-Zip:	D (TOLTEN, KATH 148 ALLISON F WILLOW GRO	RD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (MOORE, SARA 6104 WEBB RI TAMPA, FL 33	D #306		Title: Name: Address: City-St-Zip:	MOORE, SARA	ONE LAKE DRIVE #102	
Title: Name: Address: City-St-Zip:	D () MOORE, CHAR 32 FOREST AV AMBLER, PA	/E		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (MOORE, MICH 6104 WEBB RI TAMPA, FL 33	D STE 1304		Title: Name: Address: City-St-Zip:	MOORE, MICH	ONE LAKE DRIVE #102	

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: CHARLES A MOORE D 04/28/2009