

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109158

FILED
Feb 06, 2009
Secretary of State

Entity Name: PALM BEACH FARRIER SUPPLY, INC.

Current Principal Place of Business:

3500 FAIRLANE FARMS RD
SUITE 13
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

3500 FAIRLANE FARMS RD
#13
WELLINGTON, FL 33414

New Mailing Address:

3500 FAIRLANE FARMS RD
SUITE 13
WELLINGTON, FL 33414

FEI Number: 20-0288521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REAM, JOY
3500 FAIRLANE FARMS RD, #13
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

REAM, JOY M
3500 FAIRLANE FARMS RD, #13
WELLINGTON, FL 33414 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: JOY M. REAM

02/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REAM, JOY M
Address: 3500 FAIRLANE FARMS RD #13
City-St-Zip: WELLINGTON, FL 33414

Title: MD () Delete
Name: REAM, JERALD A
Address: 2211 WASHINGTONBLVD.
City-St-Zip: BELPRE, OH 45714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MD (X) Change () Addition
Name: REAM, JERALD A
Address: 2211 WASHINGTON BLVD.
City-St-Zip: BELPRE, OH 45714

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: JOY M. REAM

PD

02/06/2009

Electronic Signature of Signing Officer or Director

Date