

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116127

Entity Name: MACK ROBINSON & SONS, INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

200 SW SPENCER COURT  
SUITE 114  
LAKE CITY, FL 32024

## New Principal Place of Business:

24262 HYW 129  
O'BRIEN, FL 32071

## Current Mailing Address:

200 SW SPENCER COURT  
SUITE 114  
LAKE CITY, FL 32024

## New Mailing Address:

24262 HYW 129  
O'BRIEN, FL 32071

FEI Number: 20-0315798

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, RONALD M SR.  
24262 HWY 129  
O'BRIEN, FL 32071 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: P ( ) Delete  
Name: ROBINSON, RONALD M SR.  
Address: 24262 HWY 129  
City-St-Zip: O'BRIEN, FL 32071

Title: VP ( ) Delete  
Name: ROBINSON, WILLIAM J  
Address: 24262 HWY 129  
City-St-Zip: O'BRIEN, FL 32071

Title: VP ( ) Delete  
Name: ROBINSON, CHERYLL E  
Address: 24262 HWY 129  
City-St-Zip: O'BRIEN, FL 32071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CHERYLL ROBINSON

VP

04/29/2008

Electronic Signature of Signing Officer or Director

Date