## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000156307

Entity Name: MAYES, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace Of Dusiliess.

10361 BUTTERFLY PALM DR 7503 SIKA DEER WAY FORT MYERS, FL 33912 FORT MYERS, FL 33966

Current Mailing Address: New Mailing Address:

4129 SE 2ND AVE CAPE CORAL, FL 33904

FEI Number: 52-2408270 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAYES, ANTHONY T

10361 BUTTERFLY PALM DRIVE, UNIT 741

FORT MYERS, FL 33912 US

MAYES, ANTONY T

7503 SIKA DEER WAY

FORT MYERS, FL 33966 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: ANTONY T MAYES 04/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 MAYES, ANTONY YT
 Name:
 MAYES, ANTONY T

 Address:
 10361 BUTTERFLY DR, UNIT 741
 Address:
 7503 SIKA DEER WAY

 City-St-Zip:
 FORT MYERS, FL 33912
 City-St-Zip:
 FORT MYERS, FL 33912

Name: MAYES, LYN Name: MAYES, LYN

Address: 10361 BUTTERFLY PALM DR Address: 7503 SIKA DEER WAY
City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33966

Title: ST () Delete Title: () Change () Addition

 Name:
 MAYES, KAREN G
 Name:

 Address:
 4129 SE 2ND AVE
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33904
 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: ANTONY T MAYES PRES 04/23/2009