

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071010

Entity Name: 601 NORTH INC

FILED
Feb 09, 2009
Secretary of State

Current Principal Place of Business:

601 N RIDGEWOOD AVE
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

955 LYNN CIR
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 26-0115634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIEGNER, LYNN E
955 LYNN CIR
ORMOND BEACH, FL 32176 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: PTS () Delete
Name: RIEGNER, LYNN E
Address: 955 LYNN CIR
City-St-Zip: ORMOND BEACH, FL 32176

Title: V () Delete
Name: EISENHAUER, CHARLES N III
Address: 60 RAINTREE DR
City-St-Zip: PORT ORANGE, FL 32127

Title: V () Delete
Name: EISENHAUER, JAMES B
Address: 834 CANDLEWOOD CIR
City-St-Zip: ORMOND BEACH, FL 32174

Title: V () Delete
Name: WILLIAMS, TERRY E
Address: PO BOX 730455
City-St-Zip: ORMOND BEACH, FL 32173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: RIEGNER, LYNN E
Address: 955 LYNN CIR
City-St-Zip: ORMOND BEACH, FL 32176

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: TERRY E WILLIAMS

V

02/09/2009

Electronic Signature of Signing Officer or Director

Date