

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000000297

FILED
May 01, 2009
Secretary of State

Entity Name: NORTH FLORIDA LOGISTICS CORP.

Current Principal Place of Business:

6436 BOLD VENTURE TRAIL
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

6436 BOLD VENTURE TRAIL
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 83-0502772 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEMENWAY, MICHAEL C.
6436 BOLD VENTURE TRAIL
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

HEMENWAY, MICHAEL C PRES.
6436 BOLD VENTURE TRAIL
TALLAHASSEE, FL 32309 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: MICHAEL HEMENWAY, PRESIDENT 05/01/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEMENWAY, MICHAEL C.
Address: 6436 BOLD VENTURE TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HEMENWAY, MICHAEL C
Address: 6436 BOLD VENTURE TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP () Change (X) Addition
Name: MCKNIGHT, LUCY A
Address: 6436 BOLD VENTURE TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

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: MICHAEL HEMENWAY PRES 05/01/2009
Electronic Signature of Signing Officer or Director Date