

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000048782

Entity Name: ELIXSON MATERIALS, INC.

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

P000 SW 121ST AVENUE
LAKE BUTLER, FL 32054

New Principal Place of Business:

6000 SW 121ST AVENUE
LAKE BUTLER, FL 32054

Current Mailing Address:

P.O. BOX 143
WORTHINGTON SPRINGS, FL 326970143

New Mailing Address:

6000 SW 121 ST AVENUE
LAKE BUTLER, FL 32054

FEI Number: 26-2651831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ELIXON, TONDA
6000 SW 121ST AVENUE
LAKE BUTLER, FL 32054 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: PVST () Delete
Name: ELIXSON, TONDA
Address: P.O. BOX 143
City-St-Zip: WORTHINGTON SPRINGS, FL 326970143

Title: D () Delete
Name: ELIXSON, TONDA
Address: P.O. BOX 143
City-St-Zip: WORTHINGTON SPRINGS, FL 326970143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: ELIXSON, TONDA
Address: 6000 SW 121 AVE
City-St-Zip: LAKE BUTLER, FL 32054

Title: D (X) Change () Addition
Name: ELIXSON, ALVIN
Address: 6000 SW 121 AVE
City-St-Zip: LAKE BUTLER, FL 32054

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: ALVIN ELIXSON

D

04/07/2009

Electronic Signature of Signing Officer or Director

Date