2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000010476

Entity Name: MAXHAM & SON'S, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: 4701 SW 45TH ST. DAVIE, FL 33314 US			New Principal Place of Business:	
Current Mailing Address:			New Mailing Address:	
3261 SW 44TH ST. FORT LAUDERDALE, FL 33312 US				
FEI Number: 65-0499302 FEI Number Applied For () FEI Number			nber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
ELIZABETH J MAXHAM 6611 CUSTER ST HOLLYWOOD, FL 33024 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:				
		Signature of Registered Agent		Date
Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E MAXHAM, JOHN I 6611 CUSTER ST HOLLYWOOD, F	Г.	Title: (Name: Address: City-St-Zip:	() Change() Addition
Address:	V ()E MAXHAM, JOHN I 6611 CUSTER ST HOLLYWOOD, FI	τ.	Title: (Name: Address: City-St-Zip:	() Change() Addition
Address:	SD () E MAXHAM, ELIZAE 6611 CUSTER ST HOLLYWOOD, F	BETH J. FREET	Title: (Name: Address: City-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	D () C MAXHAM, JAMES 5289 SW 93 AVE FORT LAUDERD		Title: (Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CP ()E MAXHAM, ALLISO 6611 CUSTER ST HOLLYWOOD, FI	F	Title: (Name: Address: City-St-Zip:	() Change () Addition

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: ELIZABETH MAXHAM SD 04/30/2009