2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2009
Secretary of State

DOCUMENT# P94000063609

Entity Name: EARLE ENTERPRISES OF SOUTH CAROLINA, INC.

Current Principal Place of Business:

712 LITCHFIELD LANE
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7967
CLEARWATER, FL 33758

New Mailing Address:

FEI Number: 59-3277161 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STANSELL, MAXIE F
712 LITCHFIELD LANE
DUNEDIN, FL 34698 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:	D	( ) Delete
Name:	STANSELL, MAXIE F	
Address:	P.O. BOX 7967 N/A	
City-St-Zip:	CLEARWATER, FL 33758	
Title:	D	( ) Delete
Name:	STANSELL, JAMES C	
Address:	P.O. BOX 7967 N/A	
City-St-Zip:	CLEARWATER, FL 33758	
Title:	V	( ) Delete
Name:	STANSELL, JAMIE	
Address:	54398 AMBER DRIVE	
City-St-Zip:	MACOMB, MI 48042	
Title:	D	( ) Delete
Name:	BELL, ROBIN S	
Address:	1357 WOODCREST AVE.	
City-St-Zip:	CLEARWATER, FL 33756	
Title:	V	( ) Delete
Name:	STANSELL, TAMMY	
Address:	652 DEXTER DRIVE	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	V	( ) Delete
Name:	STANSELL, PETER M	
Address:	542 1/2 LEXINGTON STREET	
City-St-Zip:	DUNEDIN, FL 34698	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: MAXIE F. STANSELL D 03/15/2009

Electronic Signature of Signing Officer or Director — Date