

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000019833

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: MAHER & MAHER ENTERPRISES, INC.

## Current Principal Place of Business:

1965 SEMINOLE RD  
ATLANTIC BEACH, FL 32233 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 611298  
NORTH MIAMI, FL 33261 US

## New Mailing Address:

1965 SEMINOLE RD  
ATLANTIC BEACH, FL 32233 US

FEI Number: 59-3366676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAHER, JEFFREY T.  
1965 SEMINOLE RD  
ATLANTIC BEACH, FL 32233 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: MAHER, JUDITH L  
Address: 1965 SEMINOLE RD  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete  
Name: MAHER, JEFFREY T  
Address: 1965 SEMINOLE RD  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete  
Name: MAHER, ELEANORE D  
Address: 716 SILVERSMITH CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: MAHER, THOMAS F JR.  
Address: 716 SILVERSMITH CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MAHER, ELEANORE D  
Address: 192 ORCHARD PASS AVE #512  
City-St-Zip: PONTE VEDRA, FL 32081

Title: D (X) Change ( ) Addition  
Name: MAHER, THOMAS F JR.  
Address: 192 ORCHARD PASS AVE #512  
City-St-Zip: PONTE VEDRA, FL 32081

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: JEFFREY T MAHER

D

04/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date