

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000061081

Entity Name: M A L PROPERTIES, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

183 S E CAMELOT LOOP
#108 OFFICE
LAKE CITY, FL 32025 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 6
WHITE SPRINGS, FL 32096 US

New Mailing Address:

FEI Number: 59-3417808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RON, PEACOCK
9406 W US HWY 90
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

RON, PEACOCK
9206 W US HWY 90
LAKE CITY, FL 32055 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: RON PEACOCK

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEACOCK, RON
Address: P. O. BOX 6
City-St-Zip: WHITE SPRINGS, FL 32096 US

Title: S () Delete
Name: PEACOCK, RON
Address: 206 S. MARION ST.
City-St-Zip: LAKE CITY, FL 32025 US

Title: T () Delete
Name: PEACOCK, RON
Address: 206 S. MARION ST.
City-St-Zip: LAKE CITY, FL 32025 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEACOCK, RON
Address: P. O. BOX 6
City-St-Zip: WHITE SPRINGS, FL 32096 US

Title: S (X) Change () Addition
Name: PEACOCK, RON
Address: 9206 W US HWY 90
City-St-Zip: LAKE CITY, FL 32055 US

Title: T (X) Change () Addition
Name: PEACOCK, RON
Address: 9206 W US HWY 90
City-St-Zip: LAKE CITY, FL 32055 US

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: RON PEACOCK

PST

04/30/2009

Electronic Signature of Signing Officer or Director

Date