

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S42292

FILED
Apr 22, 2009
Secretary of State

Entity Name: M. MOONEY & ASSOCIATES, SURVEYORS INC.

Current Principal Place of Business:

333 FAULKENBURG ROAD
C-305
TAMPA, FL 33619

New Principal Place of Business:

333 N. FAULKENBURG ROAD
C-305
TAMPA, FL 33619

Current Mailing Address:

333 FAULKENBURG ROAD
C-305
TAMPA, FL 33619

New Mailing Address:

333 N. FAULKENBURG ROAD
C-305
TAMPA, FL 33619

FEI Number: 59-3055957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOONEY, MICHAEL P.
333 FAULKENBURG RD.
C-305
TAMPA, FL 33619 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: MOONEY, MICHAEL P.
Address: 333 FAULKENBURG RD.,C305
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOONEY, MICHAEL P.
Address: 333 N. FAULKENBURG RD.,C305
City-St-Zip: TAMPA, FL 33619

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: MICHAEL P. MOONEY

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date