

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V15561

Entity Name: R & M ENTERPRISES, INC.

FILED
Mar 15, 2009
Secretary of State

Current Principal Place of Business:

1601 W. 10TH CT.
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

531 JASON DR.
LADY LAKE, FL 32159

New Mailing Address:

FEI Number: 59-3113755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALLORY, PETER A.
405 OAK AVENUE
PANAMA CITY, FL 32401 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: MCLANE, HAROLD R.,
Address: 2812 HWY. 2321
City-St-Zip: SOUTHPORT, FL

Title: D () Delete
Name: MCLANE, MARIE,
Address: 2812 HWY. 2321
City-St-Zip: SOUTHPORT, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCLANE, HAROLD R.,
Address: 2812 HWY. 2321
City-St-Zip: SOUTHPORT, FL 32401

Title: D (X) Change () Addition
Name: MCLANE, MARIE,
Address: 2812 HWY. 2321
City-St-Zip: SOUTHPORT, FL 32401

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: HAROLD R. MC LANE

D

03/15/2009

Electronic Signature of Signing Officer or Director

_____ Date