

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 631689

Entity Name: H.A.F., INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

660 W. PIERCE ST.
P.O. BOX 1287
LAKE ALFRED, FL 33850

New Principal Place of Business:

660 W. PIERCE ST.
LAKE ALFRED, FL 33850

Current Mailing Address:

660 W. PIERCE ST.
P.O. BOX 1287
LAKE ALFRED, FL 33850

New Mailing Address:

660 W. PIERCE ST.
LAKE ALFRED, FL 33850

FEI Number: 59-1942172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMILTON, ROBERT J., JR.
660 W. PIERCE STREET
LAKE ALFRED, FL 33850 US

Name and Address of New Registered Agent:

HAMILTON, FLORENCE M
660 W. PIERCE STREET
LAKE ALFRED, FL 33850 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: FLORENCE M. HAMILTON

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAMILTON, ROBERT J JR
Address: 660 W. PIERCE STREET
City-St-Zip: LAKE ALFRED, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAMILTON, FLORENCE M
Address: 660 W. PIERCE STREET
City-St-Zip: LAKE ALFRED, FL 33850

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: FLORENCE M. HAMILTON

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date