2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G58482

Entity Name: HAND HCORVETTE, INC.

FILED Mar 05, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
C/O JAMES C. HARI 100 O'BRIEN ROAD FERN PARK, FL 32	RELSON	New I Intelpar I lace	or Business.	
Current Mailing Address:		New Mailing Address	New Mailing Address:	
C/O JAMES C. HARI 100 O'BRIEN ROAD FERN PARK, FL 32'				
FEI Number: 59-2467757	7 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address	of Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
HARRELSON, JAME 100 O'BRIEN ROAD FERN PARK, FL 32				
The above named er in the State of Florida		purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		gent	Date	
Election Campaign Fina	ncing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: PD Name: HARRELS	() Delete ON, JAMES C.,	Title: Name:	() Change () Addition	

Address:

City-St-Zip:

1831 ASTER DRIVE

WINTER PARK, FL 32792

Address: City-St-Zip:

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: JAMES C. HARRELSON **PRES** 03/05/2009