## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G58482

Entity Name: HAND HCORVETTE, INC.

**FILED** Mar 12, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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C/O JAMES C. HARRELSON 100 O'BRIEN ROAD FERN PARK, FL 32730

**Current Mailing Address: New Mailing Address:** 

C/O JAMES C. HARRELSON 100 O'BRIEN ROAD FERN PARK, FL 32730

FEI Number: 59-2467757 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARRELSON, JAMES C. 100 O'BRIEN ROAD FERN PARK, FL 32730 US

**OFFICERS AND DIRECTORS:** 

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:

Date

Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

Title: ( ) Delete HARRELSON, JAMES C., HARRELSON, JAMES C., Name: Name: 1831 ASTER DRIVE Address: 1831 ASTER DRIVE Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

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.

Ρ SIGNATURE: JAMES C HARRELSON 03/12/2009