

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086574

Entity Name: 502 INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

3316 19TH ST SW
LEHIGH ACRES, FL 33971

New Principal Place of Business:

3316 19TH ST SW
LEHIGH ACRES, FL 33976

Current Mailing Address:

3316 19TH ST SW
LEHIGH ACRES, FL 33971

New Mailing Address:

3316 19TH ST SW
LEHIGH ACRES, FL 33976

FEI Number: 81-0627948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATT, STEVE
3316 19TH ST SW
LEHIGH ACRES, FL 33971 US

Name and Address of New Registered Agent:

HATT, NANCY D
3316 19TH ST SW
LEHIGH ACRES, FL 33976 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: NANCY D. HATT

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HATT, STEVE
Address: 3316 19TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: V () Delete
Name: HATT, MIKE
Address: 3316 19TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HATT, NANCY
Address: 3316 19TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: DVP (X) Change () Addition
Name: HATT, STEVE
Address: 3316 19TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: S () Change (X) Addition
Name: HATT, MICHAEL
Address: 3316 19TH ST. SW
City-St-Zip: LEHIGH ACRES, FL 33976

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: NANCY D. HATT

DP

04/29/2009

Electronic Signature of Signing Officer or Director

Date