2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# P04000106500

Entity Name: ECKEL CORPORATION

Current Principal Place of Business:

7873 GUNN HIGHWAY
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

7873 GUNN HIGHWAY
TAMPA, FL 33626

New Mailing Address:

FEI Number: 01-0820407 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ECKEL, RICHARD A
26714 AFFIRMED DRIVE
WESLEY CHAPEL, FL 33544 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:	P	( ) Delete
Name:	ECKEL, THOMAS A	
Address:	22814 ROBINS NEST CT	
City-St-Zip:	LAND O LAKES, FL 34639	
Title:	V	( ) Delete
Name:	ECKEL, RICHARD A	
Address:	26714 AFFIRMED DRIVE	
City-St-Zip:	WESLEY CHAPEL, FL 33544	
Title:	V	( ) Delete
Name:	ECKEL, JOANN M	
Address:	15310 LAKE BELLA VISTA DR	
City-St-Zip:	TAMPA, FL 33625	
Title:	V	( ) Delete
Name:	ECKEL, JENNIFER M	
Address:	15310 LAKE BELLA VISTA DR	
City-St-Zip:	TAMPA, FL 33625	
Title:	V	( ) Delete
Name:	RAMIREZ, MAX N	
Address:	1245 BECKENHAM WAY	
City-St-Zip:	WESLEY, FL 33543	
Title:	PM	( ) Delete
Name:	ECKEL, JANIS M	
Address:	16405 OFFENHAUER ROAD	
City-St-Zip:	ODESSA, FL 33556	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
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: JOANN M ECKEL V 03/30/2009

Electronic Signature of Signing Officer or Director — Date