2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# P05000024531

Entity Name: SALTY HOME INC.

Current Principal Place of Business:

10793 SW TRADITION SQUARE
PORT ST. LUCIE, FL 34987

New Principal Place of Business:

10793 SW FOUNDERS SQUARE
PORT ST. LUCIE, FL 34987 US

Current Mailing Address:

10793 SW TRADITION SQUARE
PORT ST. LUCIE, FL 34987

New Mailing Address:

10793 SW TRADITION SQ.
PORT ST. LUCIE, FL 34987 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: D ( ) Delete
Name: SOUMOFF, JESSICA
Address: 10793 SW TRADITION SQUARE
City-St-Zip: PORT ST. LUCIE, FL 34987

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition
Name: SOUMOFF, JESSICA
Address: 10793 SW TRADITION SQUARE
City-St-Zip: PORT ST. LUCIE, FL 3495387

Title: T ( ) Change (X) Addition
Name: SOUMOFF, JESSICA
Address: 10793 SW TRADITION SQUARE
City-St-Zip: PORT ST. LUCIE, FL 3495387

Title: D ( ) Change (X) Addition
Name: SOUMOFF, JESSICA
Address: 10793 SW TRADITION SQUARE
City-St-Zip: PORT ST. LUCIE, FL 3495387

Title: P ( ) Change (X) Addition
Name: SOUMOFF, PATRICIA
Address: 10793 SW TRADITION SQUARE
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: S ( ) Change (X) Addition
Name: SOUMOFF, PATRICIA
Address: 10793 SW TRADITION SQUARE
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: D ( ) Change (X) Addition
Name: SOUMOFF, PATRICIA
Address: 10793 SW TRADITION SQUARE
City-St-Zip: PORT ST. LUCIE, FL 34987

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: JESSICA SOUMOFF P 02/04/2009
Electronic Signature of Signing Officer or Director Date