

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000167560

Entity Name: HEALTHY HOMES INTL., INC.

FILED  
Apr 30, 2009  
Secretary of State

**Current Principal Place of Business:**

902 BRITTON ST  
LARGO, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

1901 W BAY DR, SUITE 17-214  
STE 17-214  
LARGO, FL 33770 US

**New Mailing Address:**

FEI Number: 68-0619013      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BECKERS, DAVID A  
15777 BOLESTA RD #128  
CLEARWATER, FL 33760 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/D ( ) Delete  
Name: DEKKER, LAUREL A PRES  
Address: 1901 W BAY DR, STE 17-214  
City-St-Zip: LARGO, FL 33770 US

Title: S/D ( ) Delete  
Name: OCEAN, MR SEC  
Address: 1901 W BAY DR, SUITE 17-214  
City-St-Zip: LARGO, FL 33770 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP/D (X) Change ( ) Addition  
Name: OCEAN, MR VP  
Address: 1901 W BAY DR, SUITE 17-214  
City-St-Zip: LARGO, FL 33770 US

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: LAUREL A DEKEKR

PRES

04/30/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date