2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# P06000155954

Entity Name: MOMMY CORP.

Current Principal Place of Business:

1947 MORRILL STREET
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 758
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 57-1220840 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAXTER, MARY P ESQ.
401 NORTH CATTEMEN ROAD, SUITE 108
SARASOTA, FL 34232 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: V ( ) Delete
Name: BONIFIELD, KELLIE
Address: 4211 BRADENTON ROAD
City-St-Zip: SARASOTA, FL 34234

Title: P ( ) Delete
Name: HUTCHENS, JENNIFER
Address: 1947 MORRILL STREET
City-St-Zip: SARASOTA, FL 34236

Title: AD ( ) Delete
Name: EISENMAN, ROBIN
Address: 4688 FALCON RIDGE
City-St-Zip: SARASOTA, FL 34233

Title: MSD ( ) Delete
Name: MOBLEY, BRIDGET
Address: 5770 SANDY POINT DRIVE
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition
Name: MALONE, SARA
Address: 326 OHIO PLACE
City-St-Zip: SARASOTA, FL 34236

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: JENNIFER HUTCHENS P 03/30/2009

Electronic Signature of Signing Officer or Director — Date