2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000094267

Entity Name: ETW PROPERTIES, INC.

SCACCHIA, RITA M

SOUTHPORT, CT 06890

2507 POST ROAD

Name:

Address:

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8934 CONROY WINDERMERE ROAD ORLANDO, FL 32835 **Current Mailing Address: New Mailing Address:** 2507 POST ROAD 2ND FLOOR SOUTHPORT, CT 06890 FEI Number: 20-5249623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUBMAN, CHRISTOPHER J 8934 CONROY WINDERMERE ROAD ORLANDO, FL 32835 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WOODS, ELDRICK Name: Name: 8934 CONROY WINDERMERE ROAD Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: PST Title: () Delete (X) Change () Addition Name: HUBMAN, CHRISTOPHER J Name: HUBMAN, CHRISTOPHER J 8934 CONROY WINDERMERE ROAD 8934 CONROY WINDERMERE ROAD Address: Address: ORLANDO, FL 32835 ORLANDO, FL 32835 City-St-Zip: City-St-Zip: Title: Title: AS () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RITA M. SCACCHIA AS 04/28/2009