

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 235221

FILED  
Jan 16, 2008  
Secretary of State

Entity Name: HOOVER CANVAS PRODUCTS, CO.

## Current Principal Place of Business:

844 N.W. 9TH AVE.  
FORT LAUDERDALE, FL 33311

## New Principal Place of Business:

## Current Mailing Address:

844 N.W. 9TH AVE.  
FORT LAUDERDALE, FL 33311

## New Mailing Address:

FEI Number: 59-1875131      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARROLL, JAMES E JR  
844 NW 9TH AVE.  
FORT LAUDERDALE, FL 33311      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: PD ( ) Delete  
Name: CARROLL, JAMES E JR,  
Address: 2860 NE 28 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: SVP ( ) Delete  
Name: FISHER, KIP E  
Address: 4992 SW 105 WAY  
City-St-Zip: COOPER CITY, FL 33328

Title: T ( ) Delete  
Name: FABIEN-SPRATLIN, LUCIE  
Address: 7516 SW 28 STREET  
City-St-Zip: DAVIE, FL 33314

Title: S ( ) Delete  
Name: FABIEN-SPRATLIN, LUCIE  
Address: 7516 SW 28 STREET  
City-St-Zip: DAVIE, FL 33314

Title: VP ( ) Delete  
Name: CARROLL, MATTHEW R  
Address: 108 PASEOS WAY  
City-St-Zip: JUPITER, FL 33458

## 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:

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: JAMES E. CARROLL JR.

PD

01/16/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date