

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 258983

FILED
May 07, 2009
Secretary of State

Entity Name: PERSONAL INVESTMENTS INC

Current Principal Place of Business:

6558 DOG TRACK RD
INTERSECTION HWY 79 & HWY 20
EBRO, FL 32437 US

New Principal Place of Business:

6558 DOG TRACK RD
EBRO, FL 32437 US

Current Mailing Address:

6558 DOG TRACK RD
INTERSECTION HWY 79 & HWY 20
EBRO, FL 32437 US

New Mailing Address:

6558 DOG TRACK RD
EBRO, FL 32437 US

FEI Number: 59-1162937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESS, STOCKTON R
6512 DOG TRACK RD.
EBRO, FL 32437 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPD () Delete
Name: HESS, STOCKTON R
Address: 6512 DOG TRACK RD
City-St-Zip: EBRO, FL 32437

Title: SD () Delete
Name: HESS, HARRY L
Address: 6558 DOG TRACK RD
City-St-Zip: EBRO, FL 32437

Title: D () Delete
Name: STEVENS, GRAIG R
Address: 5501 ARNOLD RD.
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: HATER, ROBERT E II
Address: 8315 NORMANDY DR.
City-St-Zip: CLEVELS, OH 45002

Title: D () Delete
Name: HATER, JOHN M
Address: 4814 CULBREATH ISLES
City-St-Zip: TAMPA, FL 33629

Title: VPD () Delete
Name: AUSTIN, PAULETTE
Address: 17315 LINDA VISTA CIRCLE
City-St-Zip: LUTZ, FL 33548

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:

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: STOCKTON R. HESS

PRES

05/07/2009

Electronic Signature of Signing Officer or Director

Date