

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 265576

FILED  
Mar 12, 2008  
Secretary of State

Entity Name: HERMANS TV & APPLIANCES, INC.

## Current Principal Place of Business:

114 WEST PARK AVE  
LAKE WALES, FL 33853

## New Principal Place of Business:

## Current Mailing Address:

114 WEST PARK AVE  
LAKE WALES, FL 33853

## New Mailing Address:

FEI Number: 59-0994360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HATFIELD, THOMAS L  
3854 ABC ROAD  
LAKE WALES, FL 33853 US

## Name and Address of New Registered Agent:

HATFIELD, THOMAS L  
3854 ABC ROAD  
LAKE WALES, FL 33859 US

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: THOMAS HATFIELD

03/12/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: HATFIELD, JODY  
Address: 3854 ABC RD  
City-St-Zip: LAKE WALES, FL 00000,

Title: PD ( ) Delete  
Name: HATFIELD, THOMAS L,  
Address: 3854 ABC RD  
City-St-Zip: LAKE WALES, FL

Title: S ( ) Delete  
Name: HATFIELD, JODY  
Address: 3854 ABC RD  
City-St-Zip: LAKE WALES, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: HATFIELD, JODY  
Address: 3854 ABC RD  
City-St-Zip: LAKE WALES, FL 33859

Title: PD (X) Change ( ) Addition  
Name: HATFIELD, THOMAS L,  
Address: 3854 ABC RD  
City-St-Zip: LAKE WALES, FL 33859

Title: S (X) Change ( ) Addition  
Name: HATFIELD, JODY  
Address: 3854 ABC RD  
City-St-Zip: LAKE WALES, FL 33859

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: THOMAS HATFIELD

PD

03/12/2008

Electronic Signature of Signing Officer or Director

Date