2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 311978

FILED Apr 13, 2009 Secretary of State

Entity Name: NORTON HOME IMPROVEMENT COMPANY, INC.

Current Principal Place of Business: New Principal Place of Business:

3367 S US HWY 441 SUITE 101 LAKE CITY, FL 32025 US

Current Mailing Address: New Mailing Address:

3367 S US HWY 441 SUITE 101 LAKE CITY, FL 32025 US

FEI Number: 39-0971008 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:

 NORTON, JAMES H
 NORTON II, JAMES H

 3367 S US HWY 441 SUITE101
 3367 S US HWY 441 SUITE101

 LAKE CITY, FL 32025
 US

 LAKE CITY, FL 32025
 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: JAMES H NORTON II 04/13/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: NORTON, JAMES H Name: NORTON II, JAMES H Address: 511 SW THURMAN TERRACE Address: 156 SE PEYTON LOOP, APT 105

City-St-Zip: LAKE CITY, FL 32024 City-St-Zip: LAKE CITY, FL 32025

Title: VP () Delete Title: VP (X) Change () Addition

Name: NORTON II, JAMES H Name: NORTON, JACK J

 Address:
 6952 SW SR247
 Address:
 2663 SW TUSTENUGGEE AVE

 City-St-Zip:
 LAKE CITY, FL 32024
 City-St-Zip:
 LAKE CITY, FL 32025

Title: SEC () Delete Title: () Change () Addition

 Name:
 LEE, SHANNON
 Name:

 Address:
 525 SW SEFNER COURT
 Address:

 City-St-Zip:
 LAKE CITY, FL 32025
 City-St-Zip:

Title: TREA () Delete Title: TREA (X) Change () Addition

 Name:
 NORTON, JACK J
 Name:
 LEE, SHANNON

 Address:
 2663 SW TUSTENUGGEE AVE
 Address:
 525 SW SEFNER CT

 City-St-Zip:
 LAKE CITY, FL 32025
 City-St-Zip:
 LAKE CITY, FL 32025

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 H NORTON II DP 04/13/2009