

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 323827

FILED
May 03, 2009
Secretary of State

Entity Name: HOMESTEAD MOWER CENTER, INC.

Current Principal Place of Business:

1000 N FLAGLER AVE
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

1000 N FLAGLER AVE
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 59-1723872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, TED F
240 NE 16TH ST
HOMESTEAD, FL 33030 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: T () Delete
Name: WILLIAMS, TED
Address: 240 N.E. 16 ST.
City-St-Zip: HOMESTEAD, FL

Title: VP () Delete
Name: WILLIAMS, SANDRA
Address: 240 NE 16 ST
City-St-Zip: HOMESTEAD, FL

Title: P () Delete
Name: WILLIAMS, KEVIN
Address: 28888 SW 193 AVE
City-St-Zip: HOMESTEAD, FL 33030

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:

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: KEVIN WILLIAMS

P

05/03/2009

Electronic Signature of Signing Officer or Director

Date