

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 557060

FILED
Mar 01, 2009
Secretary of State

Entity Name: PIGGY POPPINS, INCORPORATED

Current Principal Place of Business:

PIGGY POPINS PAY LESS AUTO SALES
21757 N.W. 60TH AVE.
MCINTOSH, FL 32664 US

New Principal Place of Business:

Current Mailing Address:

8341 W HIGHWAY 318
REDDICK, FL 32686

New Mailing Address:

FEI Number: 59-1789295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, GEORGE E
8341 W. HIGHWAY 318
REDDICK, FL 32686 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: P () Delete
Name: SMITH, GEORGE E
Address: 8341 W. HIGHWAY 318
City-St-Zip: REDDICK, FL

Title: S () Delete
Name: SMITH, ALMA G
Address: 8341 W. HIGHWAY 318
City-St-Zip: REDDICK, FL

Title: V () Delete
Name: SMITH, ADRIEN D
Address: 8351 W. HIGHWAY 318
City-St-Zip: REDDICK, FL

Title: T () Delete
Name: SMITH, KIMBERLY Y
Address: 8351 W HWY 318
City-St-Zip: REDDICK, FL

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:

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: ADRIEN D. SMITH

MR.

03/01/2009

Electronic Signature of Signing Officer or Director

_____ Date