

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000654

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: UPPER MOHAWK, INC.

## Current Principal Place of Business:

4495 S. HOPKINS AVE  
TITUSVILLE, FL 32796 US

## New Principal Place of Business:

410 S. INDIAN RIVER AVE.  
TITUSVILLE, FL 32796 US

## Current Mailing Address:

4495 S. HOPKINS AVE  
TITUSVILLE, FL 32796 US

## New Mailing Address:

410 S. INDIAN RIVER AVE.  
TITUSVILLE, FL 32796 US

FEI Number: 34-1768166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASON, ANN  
1642 KIMBERLY AVE.  
TITUSVILLE, FL 32796 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: CD ( ) Delete  
Name: BARNES, KEN G  
Address: 4495 S HOPKINS AVE  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: SD ( ) Delete  
Name: HESS, LOREN H  
Address: 4141 COL. GLENN HIGHWAY, SUITE 211  
City-St-Zip: BEAVERCREEK, OH 45431 US

Title: PT ( ) Delete  
Name: BARNES, PATRICIA A  
Address: 4495 S. HOPKINS AVE  
City-St-Zip: TITUSVILLE, FL 32780 US

## 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: LOREN H HESS

SEC

04/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date