

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004784

Entity Name: MHA FINANCIAL CORP

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

P.O.BOX 409 4 PHEASANT HILL ST
WESTWOOD, MA 02090

New Principal Place of Business:

4 PHEASANT HILL ST
WESTWOOD, MA 02090

Current Mailing Address:

P.O.BOX 409 4 PHEASANT HILL ST
WESTWOOD, MA 02090

New Mailing Address:

4 PHEASANT HILL ST
WESTWOOD, MA 02090

FEI Number: 04-2614709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VONFELDT, NEIL E
2287 W EAU GALLIE BLVD STE B
MELBOURNE, FL 329353163 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: CPST () Delete
Name: HOILMAN, C. WILLIAM
Address: 4 PHEASANT HILL ST
City-St-Zip: WESTWOOD, MA 02090

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: C. WILLIAM HOILMAN

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date