

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004224

FILED
Apr 29, 2009
Secretary of State

Entity Name: HSN HOLDING CORP.

Current Principal Place of Business:

1 HSN DR.
ST. PETERSBURG, FL 33729

New Principal Place of Business:

Current Mailing Address:

1 HSN DR.
ST. PETERSBURG, FL 33729

New Mailing Address:

FEI Number: 26-3109261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 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: PCEO () Delete
Name: GROSSMAN, MINDY
Address: 1 HSN DR.
City-St-Zip: ST. PETERSBURG, FL 33729

Title: VAT () Delete
Name: ATTINELLA, MICHAEL SR.
Address: 1 HSN DR.
City-St-Zip: ST. PETERSBURG, FL 33729

Title: EVS () Delete
Name: WARNER, JAMES P
Address: 1 HSN DR.
City-St-Zip: ST. PETERSBURG, FL 33729

Title: C () Delete
Name: MCINERNEY, THOMAS
Address: 555 W. 18TH ST
City-St-Zip: NEW YORK, NY 10011

Title: VC () Delete
Name: BLATT, GREGORY
Address: 555 W. 18TH ST
City-St-Zip: NEW YORK, NY 10011

Title: CFOT () Delete
Name: SCHMELING, JUDY EV
Address: 1 HSN DR.
City-St-Zip: ST. PETERSBURG, FL 33729

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: GROSSMAN, MINDY
Address: 1 HSN DR.
City-St-Zip: ST. PETERSBURG, FL 33729

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DEVS (X) Change () Addition
Name: WARNER, JAMES P
Address: 1 HSN DR.
City-St-Zip: ST. PETERSBURG, FL 33729

Title: DCFO (X) Change () Addition
Name: SCHMELING, JUDY EV
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, NY 33729

Title: VPAT (X) Change () Addition
Name: HURLEY, MICHAEL
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, FL 33729

Title: AS (X) Change () Addition
Name: FRAZIER, LINDA
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, FL 33729

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 P. WARNER

EVPS

04/29/2009

Electronic Signature of Signing Officer or Director

Date