

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98796

FILED
Mar 18, 2009
Secretary of State

Entity Name: DONALD L. HANCOCK, INC.

Current Principal Place of Business:

364GOLF VIEW RD
#297
NORTH PALM BEACH, FL 33408 US

Current Mailing Address:

P.O. BOX 14611
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

364 GOLFFVIEW RD
#207
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 59-2223913 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANCOCK, FRANCES L
364 GOLFFVIEW RD., #207
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

HANCOCK, FRANCES L MS.
364 GOLFFVIEW RD
#207
NORTH PALM BEACH, FL 33408 US

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: FRANCES L HANCOCK

03/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: HANCOCK, FRANCES L
Address: 364 GOLFFVIEW RD., #207
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: HANCOCK, FRANCES L MS.
Address: 364 GOLFFVIEW RD., #207
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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: FRANCES L HANCOCK

PST

03/18/2009

Electronic Signature of Signing Officer or Director

Date