

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G20414

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: JOE HUFF AGENCY, INC.

## Current Principal Place of Business:

13241 UNIVERSITY DRIVE  
STE. 102  
FORT MYERS, FL 33907 US

## New Principal Place of Business:

1902 HARBOUR CIRCLE  
CAPE CORAL, FL 33914 US

## Current Mailing Address:

PO BOX 08130  
FORT MYERS, FL 33908 US

## New Mailing Address:

1902 HARBOUR CIRCLE  
CAPE CORAL, FL 33914 US

FEI Number: 59-2255060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUFF, JOE  
13241 UNIVERSITY DRIVE  
STE. 102  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

HUFF, JOE  
1902 HARBOUR CIRCLE  
CAPE CORAL, FL 33914 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: HUFF, JOE  
Address: 13241 UNIVERSITY DRIVE 102  
City-St-Zip: FORT MYERS, FL 33907

Title: VS ( ) Delete  
Name: HUFF, MICKEY  
Address: 13241 UNIVERSITY DRIVE 102  
City-St-Zip: FORT MYERS, FL 33907

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: HUFF, JOE  
Address: 1902 HARBOUR CIRCLE  
City-St-Zip: CAPE CORAL, FL 33914

Title: VS (X) Change ( ) Addition  
Name: HUFF, MICKEY  
Address: 1902 HARBOUR CIRCLE  
City-St-Zip: CAPE CORAL, FL 33914

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: JOE HUFF

PTD

04/16/2009

Electronic Signature of Signing Officer or Director

Date