

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H84315

FILED
Jun 29, 2009
Secretary of State

Entity Name: EARTHBALANCE CORPORATION

Current Principal Place of Business:

C/O JACK O. HACKETT II
99 NESBIT ST
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

2579 N. TOLEDO BLADE BOULEVARD
NORTH PORT, FL 34289 US

Current Mailing Address:

C/O JACK O. HACKETT II
99 NESBIT STREET
PUNTA GORDA, FL 33950 US

New Mailing Address:

FEI Number: 59-2612208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HACKETT, JACK O II
99 NESBIT STREET
PUNTA GORDA, FL 33950 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

OFFICERS AND DIRECTORS:

Title: VS () Delete
Name: KOCUR, CHARLES L JR
Address: 27320 EGRET PL.
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: P () Delete
Name: ROSS, DONALD H
Address: 2579 N. TOLEDO BLADE BOULEVARD
City-St-Zip: NORTH PORT, FL 34289 US

Title: VT () Delete
Name: CLANCEY, FRANCIS J
Address: 4314 LONGCHAMP DR
City-St-Zip: SARASOTA, FL 33946 US

Title: VP () Delete
Name: BURNETT, KAREN F
Address: 2579 N. TOLEDO BLADE BOULEVARD
City-St-Zip: NORTH PORT, FL 34289

Title: VP () Delete
Name: LAROQUE, SARAH J
Address: 2579 N. TOLEDO BLADE BOULEVARD
City-St-Zip: NORTH PORT, FL 34289

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:

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: DONALD H. ROSS

P

06/29/2009

Electronic Signature of Signing Officer or Director

_____ Date