

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J45548

Entity Name: HOAMART, INC.

FILED
Jan 03, 2005
Secretary of State

Current Principal Place of Business:

16040 U. S. 19 NORTH
TRI CITY PLAZA
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

16040 U. S. 19 NORTH
TRI CITY PLAZA
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-2781845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOAG, ROBERT W.
16040 U. S. 19 NORTH
TRI CITY PLAZA
CLEARWATER, FL 33764 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: DP () Delete
Name: HOAG, ROBERT
Address: 2578 SPLITWOOD WAY
City-St-Zip: CLEARWATER, FL

Title: DST () Delete
Name: MARTIN, JOHN V.,
Address: 2471 E. BACON RD
City-St-Zip: HILLSDALE, MI

Title: DV () Delete
Name: HOAG, MARY JANE
Address: 2578 SPLITWOOD WAY
City-St-Zip: CLEARWATER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HOAG, ROBERT W
Address: 2578 SPLITWOOD WAY
City-St-Zip: CLEARWATER, FL 33761

Title: DST (X) Change () Addition
Name: MARTIN, JOHN V
Address: 2471 E. BACON RD
City-St-Zip: HILLSDALE, MI 49242

Title: DV (X) Change () Addition
Name: HOAG, MARY JANE
Address: 2578 SPLITWOOD WAY
City-St-Zip: CLEARWATER, FL 33761

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT W. HOAG

DP

01/03/2005

Electronic Signature of Signing Officer or Director

Date