

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K65819

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: HARDWOODS INTERNATIONAL, INC.

**Current Principal Place of Business:**

C/O DAVID FLICK  
2464 KIRKWOOD AVENUE  
NAPLES, FL 34112 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DAVID FLICK  
P.O. BOX 10277  
NAPLES, FL 34101 US

**New Mailing Address:**

FEI Number: 65-0104615

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FLICK, DAVID  
2464 KIRKWOOD AVE.  
NAPLES, FL 34112 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: VPST ( ) Delete  
Name: FLICK, GLORIA  
Address: 2332 BROADWING COURT  
City-St-Zip: NAPLES, FL 34105

Title: P ( ) Delete  
Name: FLICK, DAVID  
Address: 2332 BROADWING COURT  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: DAVID FLICK

PRES

03/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date