

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000921

FILED
Feb 23, 2009
Secretary of State

Entity Name: H CANAL DEFENSE FUND INC.

Current Principal Place of Business:

C/O BOB BRET
2190 DUMOS ST
MERRITT ISLAND, FL 32952

New Principal Place of Business:

C/O BOB BRET
2190 DUMAS ST
MERRITT ISLAND, FL 32952

Current Mailing Address:

ROBERT E. BRET
2190 DUMAS ST
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 59-3630028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRET, ROBERT E
2190 DUMAS STREET
MERRITT ISLAND, FL 32952 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: D () Delete
Name: BRET, ROBERT E
Address: PO BOX 540342
City-St-Zip: MERRITT ISLAND, FL 32954

Title: D () Delete
Name: HUBER, JOHN
Address: 2205 QUEEN ANNE ST
City-St-Zip: COCOA BEACH, FL 32932

Title: D () Delete
Name: HILL, GAIL
Address: P. O. BOX 540342
City-St-Zip: MERRITT ISLAND, FL 32954

Title: D (X) Delete
Name: LAYNE, SAM
Address: P. O. BOX 540342
City-St-Zip: MERRITT ISLAND, FL 32954

Title: D (X) Delete
Name: SAGERMAN, GARY
Address: P. O. BOX 540342
City-St-Zip: MERRITT ISLAND, FL 32954

Title: D (X) Delete
Name: TUCKER, FRED
Address: 2190 REYNARD PL
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TUCKER, FRED
Address: 2190 REYNARD PLACE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D (X) Change () Addition
Name: BOYD, JUNE
Address: 1355 MARTIN BLVD.
City-St-Zip: MERRITT ISLAND, FL 32952

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT E. BRET

PRES

02/23/2009

Electronic Signature of Signing Officer or Director

Date