

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008313

FILED
Mar 31, 2009
Secretary of State

Entity Name: KREWE OF HIP HUGGERS, INC.

Current Principal Place of Business:

5046 HIGH POINTE DR.
PENSACOLA, FL 32505

New Principal Place of Business:

3031 LOGAN DRIVE
PENSACOLA, FL 32503

Current Mailing Address:

P.O. BOX 2117
PENSACOLA, FL 32513

New Mailing Address:

FEI Number: 59-3758543 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COLLEY, ANGELA R
5046 HIGH POINTE DR.
PENSACOLA, FL 32505 US

Name and Address of New Registered Agent:

GUNTHER, KELLY
3031 LOGAN DRIVE
PENSACOLA, FL 32503 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: KELLY GUNTHER

03/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: JONES, ALLISON
Address: 7657 CHARTER OAKS DR.
City-St-Zip: PENSACOLA, FL 32514

Title: SD () Delete
Name: GILBERT, TRACY
Address: 3291 GOLDENWOOD WAY
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: CROOKE, YVETTE
Address: 4555 MENEWA PATH
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: OWENS, NIKKI
Address: 1901 E GADSDEN ST
City-St-Zip: PENSACOLA, FL 32501

Title: PD () Delete
Name: COLLEY, ANGELA
Address: 5046 HIGH POINTE DR.
City-St-Zip: PENSACOLA, FL 32505

Title: VD () Delete
Name: GUNTHER, KELLY
Address: 3031 LOGAN DRIVE
City-St-Zip: PENSACOLA, FL 32503

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:

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: ANGELA COLLEY

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date