

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005569

FILED
May 21, 2009
Secretary of State

Entity Name: LITTLE HOMETOWN SOLDIERS CORPORATION

Current Principal Place of Business:

4604 49TH STREET NORTH
SAINT PETERSBURG, FL 33709 US

New Principal Place of Business:

2026 51ST STREET SOUTH
GULFPORT, FL 33707 US

Current Mailing Address:

BOX 10402
SAINT PETERSBURG, FL 33733 US

New Mailing Address:

FEI Number: 20-0338560 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOPKINS, ELAINE
4604 49TH STREET NORTH, #127
ST PETERSBURG, FL 33709 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: HOPKINS, ELAINE
Address: P.O. BOX 10402
City-St-Zip: SAINT PETERSBURG, FL 33733

Title: V () Delete
Name: DUEY, ORPHA
Address: 1728 31ST AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: T () Delete
Name: POYOT, JANELLE
Address: 2940 7TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: D () Delete
Name: ALEXANDER, JANNINE
Address: 5908 5TH AVE N C7
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: FORD, DENISE
Address: 3470 7TH AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: S (X) Change () Addition
Name: VASQUEZ, EDDA
Address: 6474 82ND AVE NORTH
City-St-Zip: PINELLAS PARK, FL 33781

Title: EDA (X) Change () Addition
Name: ALEXANDER, JANNINE
Address: 5908 5TH AVE N C7
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: ED () Change (X) Addition
Name: GARRIOTT, JACKIE
Address: 1420 56TH STREET NORTH
City-St-Zip: GULFPORT, FL 33707

Title: PR () Change (X) Addition
Name: LEWIS, JUDITH
Address: 1527 OAK VILLAGE DR.
City-St-Zip: LARGO, FL 33712

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: ELAINE HOPKINS

P

05/21/2009

Electronic Signature of Signing Officer or Director

Date