2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009947

Entity Name: HOMESTEAD JACKPOT RODEO, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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15345 SW 256TH ST HOMESTEAD, FL 33032

Current Mailing Address: New Mailing Address:

15345 SW 256TH ST HOMESTEAD, FL 33032

FEI Number: 26-1695296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

A1A REGISTERED AGENT INC. COLAO, DEIA 5647 110TH AVE. NORTH 18850 SW 218 ST ROYAL PALM BEACH, FL 334110000 US MIAMI, FL 331701323 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: DEIA COLAO 04/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DP () Delete Title: () Change () Addition

 Name:
 DEAN, KELLY
 Name:

 Address:
 15345 SW 256TH ST
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33032
 City-St-Zip:

Title: DVP () Delete Title: DVP (X) Change () Addition Name: COLAU, DEIA Name: COLAO, DEIA

 Name
 COLAO, DEIA

 Address:
 18850 SW 218 ST

 City-St-Zip:
 MIAMI, FL 33170

 Rame:
 COLAO, DEIA

 Address:
 18850 SW 218 ST

 City-St-Zip:
 MIAMI, FL 33170

Title: DST () Delete Title: DST (X) Change () Addition

 Name:
 GOODMAN, NATASHA
 Name:
 RAULERSON, TRACY

 Address:
 421 NE 13 ST
 Address:
 18505 SW 293RD TER

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33030

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: TRACY RAULERSON DST 04/23/2009