

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010608

FILED
Jan 08, 2009
Secretary of State

Entity Name: OLD HOUNDS CORP.

Current Principal Place of Business:

18514 COATS ST
SPRING HILL, FL 34610

New Principal Place of Business:

Current Mailing Address:

18514 COATS ST
SPRING HILL, FL 34610

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFERT, RICHARD
18514 COATS ST
SPRING HILL, FL 34610 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: P () Delete
Name: JOHNSON, LEAH
Address: 304 ALBEE FARM RD
City-St-Zip: NOLOMIS, FL 34275

Title: V () Delete
Name: SINGLETON, DOTTIE
Address: 112 LINCOLN BLVD S
City-St-Zip: LAKE PLACID, FL 33852

Title: S () Delete
Name: NEWCOMB, LEE
Address: 12525 WILLIAMS RD SW 106
City-St-Zip: MOORE HAVEN, FL

Title: T () Delete
Name: WOLFERT, RICHARD
Address: 18514 COATS ST
City-St-Zip: SPRING HILL, FL 34610

Title: D () Delete
Name: JOHNSON, FRED
Address: 304 ALBEE FARM RD
City-St-Zip: NOLOMIS, FL 34275

Title: D () Delete
Name: NEWCOMB, BERNIE
Address: 12525 WILLIAMS RD SW 106
City-St-Zip: MOORE HAVEN, FL 33471

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:

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: RICHARD WOLFERT

TRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date