

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000030701

FILED
Feb 17, 2010
Secretary of State

Entity Name: HOGTOWN RENTALS, INC.

Current Principal Place of Business:

300 SOUTHWEST MEETING STREET
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

134 NW SENTINEL LN
MADISON, FL 32340

New Mailing Address:

FEI Number: 59-3655583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORFLEET, FREDERICK M
134 NW SENTINEL WAY
MADISON, FL 32340 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: SANDERS, EMMETT P III
Address: 300 SOUTHWEST MEETING STREET
City-St-Zip: MADISON, FL 32340

Title: STD
Name: SANDERS, MARY ANN
Address: 300 SOUTHWEST MEETING STREET
City-St-Zip: MADISON, FL 32340

Title: D
Name: NORFLEET, FREDERICK M
Address: 134 NW SENTINEL LN
City-St-Zip: MADISON, FL 32340

Title: D
Name: NORFLEET, NIDA N
Address: 134 NW SENTINEL LN
City-St-Zip: MADISON, FL 32340

Title: D
Name: SANDERS, FREDERICK W
Address: 601 N HORRY ST
City-St-Zip: MADISON, FL 32340

Title: D
Name: SANDERS, KIMBERLY M
Address: 601 N HORRY ST
City-St-Zip: MADISON, FL 32340

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FREDERICK M. NORFLEET

D

02/17/2010

Electronic Signature of Signing Officer or Director

Date