

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000043008

Entity Name: POTTER'S HAND, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

507 MACCHI AVE
OAKLAND, FL 34787

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 79
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 59-3646815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DP () Delete
Name: JOHNSON, S. ATTAWAY
Address: 507 MACCHI AVE
City-St-Zip: OAKLAND, FL 34787

Title: DV () Delete
Name: JORDAN-JOHNSON, EVA
Address: 507 MACCHI AVE
City-St-Zip: OAKLAND, FL 34787

Title: DT (X) Delete
Name: JOHNSON, AYINDE
Address: 1216 MELONTREE CT.
City-St-Zip: GOTHAM, FL 34734

Title: DS (X) Delete
Name: JOHNSON, NAEEM
Address: 507 MACCHI AVE
City-St-Zip: OAKLAND, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP,S (X) Change () Addition
Name: JOHNSON, S. ATTAWAY
Address: 507 MACCHI AVE
City-St-Zip: OAKLAND, FL 34787

Title: DV,T (X) Change () Addition
Name: JORDAN-JOHNSON, EVA
Address: 507 MACCHI AVE
City-St-Zip: OAKLAND, FL 34787

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

SIGNATURE: S. ATTAWAY JOHNSON

DP

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date