## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000043258

5511 NE 20 AVENUE

() Delete

OCALA, FL 34479

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

**Entity Name:** HUNTER'S EMBROIDERY SHOP, INC.

**FILED** Feb 21, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5511 N.E. 20TH AVENUE OCALA, FL 34479 **Current Mailing Address: New Mailing Address:** 5511 N.E. 20TH AVENUE OCALA, FL 34479 FEI Number: 59-3715136 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: HUNTER, RHONDA G 5511 N.E. 20TH AVENUE OCALA, FL 34479 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition WAYNE, HUNTER WESLEY, HUNTER Name: Name: 5511 NE 20 AVENUE 5511 NE 20 AVENUE Address: Address: City-St-Zip: OCALA, FL 34479 City-St-Zip: OCALA, FL 34479 Title: Title: ST () Delete (X) Change ( ) Addition RHONDA, HUNTER G Name: RHONDA, HUNTER Name: 5511NE 20 AVENUE 5511NE 20 AVENUE Address: Address: OCALA, FL 34479 OCALA, FL 34479 City-St-Zip: City-St-Zip: ( ) Delete Title: (X) Change ( ) Addition Title: WESLEY, HUNTER STACEY, HUNTER L Name: Name:

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

5511 NE 20 AVENUE

CYNTHIA, WINTERBAUER

( ) Change (X) Addition

OCALA, FL 34479

6020 NW 57TH AVE.

OCALA, FL 34482

SIGNATURE: RHONDA G. HUNTER ST 02/21/2008