

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073507

FILED
Apr 17, 2009
Secretary of State

Entity Name: HURRICANE PASS TRADERS, INC.

Current Principal Place of Business:

107 2 AVE NORTH
ST PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

935 MAIN ST
C-2
SAFETY HARBOR, FL 34695

New Mailing Address:

670 2ND ST. STE C
SAFETY HARBOR, FL 34695

FEI Number: 02-0632919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RABON, BRUCE
107 2 AVE NORTH
ST PETERSBURG, FL 33701 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: D () Delete
Name: RABON, BRUCE
Address: 935 MAIN ST C-2
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D () Delete
Name: GWYNN, MARTIN
Address: 1406 SOUTHRIDGE DR
City-St-Zip: CLEARWATER, FL 33756

Title: PD () Delete
Name: RABON, BRUCE
Address: 935 MAIN ST C-2
City-St-Zip: SAFETY HARBOR, FL 34695

Title: PD () Delete
Name: GWYNN, MARTIN
Address: 1406 SOUTHRIDGE DR
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RABON, BRUCE
Address: 670 2ND ST. STE C
City-St-Zip: SAFETY HARBOR, FL 34695

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: RABON, BRUCE
Address: 670 2ND ST N, STE C
City-St-Zip: SAFETY HARBOR, FL 34695

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: BRUCE RABON

P/D

04/17/2009

Electronic Signature of Signing Officer or Director

Date