# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2010
Secretary of State

DOCUMENT# P02000078798

**Entity Name:** HANS - ON, INC.

**Current Principal Place of Business:**

11100 SW 93 COURT ROAD
STE 10 -312
OCALA, FL 34481 US

**New Principal Place of Business:**

**Current Mailing Address:**

11100 SW 93 COURT ROAD
STE 10 -312
OCALA, FL 34481 US

**New Mailing Address:**

**FEI Number: 06-1639573** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HANS, CHARLES J MR.
11100 S.W. 93 COURT ROAD
STE 10 #312
OCALA, FL 344815164 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: DPT
Name: HANS, CHARLES J MR.
Address: 11100 S.W. 93 COURT ROAD STE 10 #312
City-St-Zip: OCALA, FL 344815164 US

Title: DVS
Name: HANS, KATRINA M MRS.
Address: 11100 S.W. 93 COURT ROAD STE 10 #312
City-St-Zip: OCALA, FL 344815164 US

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: CHARLES J. HANS DPT 01/07/2010
Electronic Signature of Signing Officer or Director Date