

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041324

FILED
Apr 30, 2009
Secretary of State

Entity Name: PANHANDLE HURRICANE PROTECTION SYSTEMS, INC.

Current Principal Place of Business:

330 SUMMIT DR.
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 603
DESTIN, FL 32540

New Mailing Address:

FEI Number: 16-1663290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMAN, LINDA S
330 SUMMIT DR
DESTIN, FL 32541 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: PS () Delete
Name: HOLMAN, KEN L
Address: 330 SUMMIT DRIVE
City-St-Zip: DESTIN, FL 32541

Title: VT () Delete
Name: HOLMAN, LINDA S
Address: 330 SUMMIT DRIVE
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KENNETH L. HOLMAN

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date

P0300004132
4-30-09

Panhandle Hurricane Protection Systems, Inc.
P.O. Box 603
Destin, FL 32540
~Ph: 850-259-1561~

April 30, 2009

Division of Corporations
PO BOX 6198
Tallahassee, FL 32314

RE: 2009 Annual Report Payment Voucher
Document #: P0300041324
Tracking #: 700154832287

To Whom It May Concern,

Please, accept this letter as a request to apply 2008 Annual Report overpayment to 2009 Annual Report.

This letter is a result of correspondence with your staff with the knowledge that we had overpaid last years' annual filing fee. When asked if we could use that overpayment, we were informed to attach this letter with this request.

Thank you.

Kenneth L. Holman
President, Panhandle Hurricane Protection Systems, Inc.