

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015780

Entity Name: MT HOME WATCH, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

3330 GULF OF MEXICO DR
SUITE 302D
LONGBOAT KEY, FL 34228 US

New Principal Place of Business:

3808 PLUMOSA TERRACE
BRADENTON, FL 34210 US

Current Mailing Address:

3330 GULF OF MEXICO DR
SUITE 302D
LONGBOAT KEY, FL 34228 US

New Mailing Address:

3808 PLUMOSA TERRACE
BRADENTON, FL 34210 US

FEI Number: 20-0658996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUNLOP, TIMOTHY
3330 GULF OF MEXICO DR.
SUITE 302D
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

DUNLOP, TIMOTHY
3808 PLUMOSA TERRACE
BRADENTON, FL 34210 US

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:

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUNLOP, TIMOTHY
Address: 3330 GULF OF MEXICO DR. SUITE 302D
City-St-Zip: LONGBOAT KEY, FL 34228 US

Title: S () Delete
Name: DUNLOP, MILESSA
Address: 3330 GULF OF MEXICO DR. SUITE 302D
City-St-Zip: LONGBOAT KEY, FL 34228 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUNLOP, TIMOTHY
Address: 3808 PLUMOSA TERRACE
City-St-Zip: BRADENTON, FL 34210 US

Title: S (X) Change () Addition
Name: DUNLOP, MILESSA
Address: 3808 PLUMOSA TERRACE
City-St-Zip: BRADENTON, FL 34210 US

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: TIMOTHY DUNLOP

MR.

04/20/2009

Electronic Signature of Signing Officer or Director

Date