

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080559

FILED
Mar 31, 2009
Secretary of State

Entity Name: HARTMAN CONSULTING, INC.

Current Principal Place of Business:

301 E. PINE STREET
SUITE 1020
ORLANDO, FL 328012741

New Principal Place of Business:

Current Mailing Address:

385 EAST WATERFRONT DRIVE
HOMESTEAD, PA 151205005

New Mailing Address:

FEI Number: 57-1206597 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBINSON, RICHARD M
301 E. PINE STREET
SUITE 1400
ORLANDO, FL 32801 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: DP () Delete
Name: DEJIDAS, GARY
Address: 301 E PINE ST STE 1020
City-St-Zip: ORLANDO, FL 32801

Title: DVPS () Delete
Name: SIEVERS, J M
Address: 301 E PINE ST STE 1020
City-St-Zip: ORLANDO, FL 32801

Title: DT () Delete
Name: PALVISAK, KARL S
Address: 301 E PINE ST STE 1020
City-St-Zip: ORLANDO, FL 32801

Title: VP () Delete
Name: HARTMAN, GERALD C
Address: 301 EAST PINE STREET SUITE 1020
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARK J. PAVLIK

VP/S

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date