

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000110709

Entity Name: TEXHOMA, INC.

FILED
Jun 30, 2009
Secretary of State

Current Principal Place of Business:

514 SW 2ND AVE
OCALA, FL 34474

New Principal Place of Business:

514 SW 2ND AVE
OCALA, FL 34471

Current Mailing Address:

514 SW 2ND AVE
OCALA, FL 34474

New Mailing Address:

P.O. BOX 231
WILLISTON, FL 32696

FEI Number: 20-1400489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FESMIRE, FLYNT
514 SW 2ND AVE
OCALA, FL 34474 US

Name and Address of New Registered Agent:

FESMIRE, FLYNT
514 SW 2ND AVE.
OCALA, FL 34471 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:

06/30/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FESMIRE, FLYNT
Address: P.O. BOX 231
City-St-Zip: WILLISTON, FL 32696 32

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FLYNT FESMIRE

PRES

06/30/2009

Electronic Signature of Signing Officer or Director

Date