

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000143882

FILED
May 10, 2007
Secretary of State**Entity Name:** HARTSELLE, INC**Current Principal Place of Business:**8200 113TH STREET NORTH
SUITE 201
SEMINOLE, FL 33772 US**New Principal Place of Business:****Current Mailing Address:**8200 113TH STREET NORTH
SUITE 201
SEMINOLE, FL 33772 US**New Mailing Address:****FEI Number:** 36-4562824**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HOFSTRA, PETER T
8640 SEMINOLE BOULEVARD
SEMINOLE, FL 33772 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**OFFICERS AND DIRECTORS:****Title:** DP () Delete
Name: HARTSELLE, ART
Address: 8200 113TH ST NO SUITE 201
City-St-Zip: SEMINOLE, FL 33772 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DP (X) Change () Addition
Name: HARTSELLE, GLENDA
Address: 8200 113TH ST NO SUITE 201
City-St-Zip: SEMINOLE, FL 33772 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: GLENDA HARTSELLE

DP

05/10/2007

Electronic Signature of Signing Officer or Director_____
Date