

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011818

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: MORNING LIGHT HOME IMPROVEMENT INC.

## Current Principal Place of Business:

902 W 1ST STREET  
RIVIERA BEACH, FL 33402

## New Principal Place of Business:

6055 NEWTON WOODS DR.  
WEST PALM BEACH, FL 33417

## Current Mailing Address:

P.O. BOX 4602  
WEST PALM BEACH, FL 33402

## New Mailing Address:

FEI Number: 42-1658519      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PROVIDENCE, JOHN  
902 W 1ST STREET  
RIVIERA BEACH, FL 33402      US

## Name and Address of New Registered Agent:

PROVIDENCE, JOHN  
6055 NEWTON WOODS DR.  
WEST PALM BEACH, FL 33417      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: JOHN PROVIDENCE

04/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: PROVIDENCE, JOHN  
Address: 902 W 1ST STREET  
City-St-Zip: RIVIERA BEACH, FL 33402

Title: S ( ) Delete  
Name: LATYTOYA, A'SHANTA  
Address: 902 W 1ST STREET  
City-St-Zip: RIVIERA BEACH, FL 33402

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: PROVIDENCE, JOHN  
Address: 6055 NEWTON WOODS DR.  
City-St-Zip: WEDT PALM BEACH, FL 33417

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: JOHN PROVIDENCE

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date