

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046537

FILED
Jan 06, 2009
Secretary of State

Entity Name: HAND-SO2 PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

11820 URADOO PL #105
TAMPA, FL 336124146

New Principal Place of Business:

11820 URADOO PL
105
TAMPA, FL 336124146 US

Current Mailing Address:

11820 URADOO PL #105
TAMPA, FL 336124146

New Mailing Address:

11820 URADOO PL
105
TAMPA, FL 336124146 US

FEI Number: 20-2557440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVELACE, WILLIAM K. ESQ.
401 S. LINCOLN AVE.
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

LOVELACE, WILLIAM K. K ESQ.
401 S. LINCOLN AVE.
CLEARWATER, FL 33756 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: WILLIAM K LOVELACE

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVT () Delete
Name: HAND, DENNIS
Address: 21104 LOS CABOS CT.
City-St-Zip: LAND O'LAKES, FL 34637

Title: DPS () Delete
Name: HAND, MARY JO
Address: 21104 LOS CABOS CT.
City-St-Zip: LAND O'LAKES, FL 34637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT (X) Change () Addition
Name: HAND, DENNIS M
Address: 21104 LOS CABOS CT.
City-St-Zip: LAND O'LAKES, FL 34637 US

Title: DPS (X) Change () Addition
Name: HAND, MARY JO M
Address: 21104 LOS CABOS CT.
City-St-Zip: LAND O'LAKES, FL 34637 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: DENNIS M. HAND

VP

01/06/2009

Electronic Signature of Signing Officer or Director

Date