2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000068232

Entity Name: HAMON & RIPPLE CORP.

NORTH PORT, FL 34291

City-St-Zip:

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6057 OLD COURT STREET NORTH PORT, FL 34291 **Current Mailing Address: New Mailing Address:** 6057 OLD COURT STREET 1312 MARKET CIRCLE NORTH PORT, FL 34291 UNIT#9 PORT CHARLOTTE, FL 33953 FEI Number: 20-2831949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUTTS, STEVEN M 6057 OLD COURT STREET NORTH PORT, FL 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BUTTS, STEVEN M Name: Name: 6057 OLD COURT STREET Address: Address: City-St-Zip: NORTH PORT, FL 34291 City-St-Zip: Title: VP/S Title: () Change () Addition () Delete Name: BUTTS, YUKO Name: 6057 OLD COURT STREET Address: 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: YUKO BUTTS VP/S 04/14/2009