

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000090218

Entity Name: HURRICANE HOTLINE INC.

**FILED**  
**Jan 28, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

8 BRINY AVE #504  
POMPANO BCH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

8 BRINY AVE #504  
POMPANO BCH, FL 33062

**New Mailing Address:**

FEI Number: 20-5210837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FLEMING, GLORIA JAKAB  
8 BRINY AVE #504  
POMPANO BCH, FL 33062 US

**Name and Address of New Registered Agent:**

FLEMING, GLORIA  
8 BRINY AVE #504  
POMPANO BCH, FL 33062 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: GLORIA FLEMING

01/28/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FLEMING, GLORIA  
Address: 8 BRINY AVE #504  
City-St-Zip: POMPANO BEACH, FL 33062

I hereby 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 all other like empowered.

SIGNATURE: GLORIA FLEMING

P

01/28/2010

Electronic Signature of Signing Officer or Director

Date