

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000001679

Entity Name: THE HONEY CART, INC.

FILED  
Apr 15, 2009  
Secretary of State

## Current Principal Place of Business:

3804 HILLVIEW CT.  
LAND O' LAKES, FL 34639

## New Principal Place of Business:

2309 MONACO VISTA DR.  
SUITE 104  
TAMPA, FL 33619

## Current Mailing Address:

3804 HILLVIEW CT.  
LAND O' LAKES, FL 34639

## New Mailing Address:

2309 MONACO VISTA DR.  
SUITE 104  
TAMPA, FL 33619

FEI Number: 20-8161276

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITE, DONALD W  
4508 HUNTSMAN CT  
TAMPA, FL 33624 US

## Name and Address of New Registered Agent:

WHITE, DONALD W  
2309 MONACO VISTA DR  
APT 104  
TAMPA, FL 33619 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: DONALD W. WHITE

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: WHITE, JO A  
Address: 3804 HILLVIEW CT.  
City-St-Zip: LAND O' LAKES, FL 34639

Title: DIR ( ) Delete  
Name: WHITE, STEPHEN M  
Address: 3804 HILLVIEW CT.  
City-St-Zip: LAND O' LAKES, FL 34639

Title: DIR ( ) Delete  
Name: LANCASTER, DEBORAH A  
Address: 9806 SKEWLEE RD  
City-St-Zip: THONOTOSA, FL 33592

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: WHITE, JO A  
Address: 2309 MONACO VISTA DR  
City-St-Zip: TAMPA, FL 33619

Title: DIR (X) Change ( ) Addition  
Name: WHITE, STEPHEN M  
Address: 5243 BAYWATER DR.  
City-St-Zip: TAMPA, FL 33615

Title: DIR (X) Change ( ) Addition  
Name: LANCASTER, DEBORAH A  
Address: 8426 CYPRESS GARDEN CT, APT 102 B  
City-St-Zip: TAMPA, FL 33614

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: JO ANN WHITE

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date