2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2009
Secretary of State

DOCUMENT# P07000019446

Entity Name: HCW SERVICES, INC.

Current Principal Place of Business:

1145 ARBROID DR.
ENGLEWOOD, FL 34223

New Principal Place of Business:

3413 PEPPERWOOD LANE
ENGLEWOOD, FL 34224

Current Mailing Address:

1145 ARBROID DR.
ENGLEWOOD, FL 34223

New Mailing Address:

3413 PEPPERWOOD LANE
ENGLEWOOD, FL 34224

FEI Number: 20-8646991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EMERY, SHAWN
1145 ARBROID DR.
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

EMERY, SHAWN
3413 PEPPERWOOD LANE
ENGLEWOOD, FL 34224 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: SHAWN EMERY 03/01/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: EMERY, SHAWN
Address: 1145 ARBROID DR.
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: EMERY, SHAWN
Address: 3413 PEPPERWOOD LANE
City-St-Zip: ENGLEWOOD, FL 34224

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: SHAWN EMERY D 03/01/2009
Electronic Signature of Signing Officer or Director Date