

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000025673

Entity Name: TAN YOUR HYDE INC

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

7381 STATE ROAD 21
KEYSTONE HEIGHTS, FL 32656

New Principal Place of Business:

Current Mailing Address:

137 WALL LAKE TRAIL
MELROSE, FL 32666

New Mailing Address:

4858 SE 2ND AVE
KEYSTONE HEIGHTS, FL 32656

FEI Number: 20-8526009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST, AMY
137 WALL LAKE TRAIL
MELROSE, FL 32666 US

Name and Address of New Registered Agent:

GODWIN, ROBERT CONNER
4858 SE 2ND AVE
KEYSTONE HEIGHTS, FL 32656 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: ROBERT CONNER GODWIN

05/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEST, AMY
Address: 137 WALL LAKE TRAIL
City-St-Zip: MELROSE, FL 32666

Title: VP () Delete
Name: LUDWIG, TIFFANY
Address: 7109 KING STREET
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: S (X) Delete
Name: LUDWIG, JESSIE
Address: 7109 KING STREET
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: TR (X) Delete
Name: WEST, CODY
Address: 137 WALL LAKE TRAIL
City-St-Zip: MELROSE, FL 32666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GODWIN, ROBERT CONNER
Address: 4858 SE 2ND AVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: VP (X) Change () Addition
Name: GODWIN, WYLENE
Address: 4858 SE 2ND AVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: ROBERT CONNER GODWIN

PRES

05/08/2009

Electronic Signature of Signing Officer or Director

Date