

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000114176

Entity Name: SWEET HOME INVESTORS INC

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

4795 S. TEXAS AVE  
UNIT C  
ORLANDO, FL 32839

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 547124  
ORLANDO, FL 32854

## New Mailing Address:

FEI Number: 71-1039958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, LASHUNDA  
4795 S. TEXAS AVE  
UNIT C  
ORLANDO, FL 32839 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: JONES, LASHUNDA  
Address: PO BOX 547124  
City-St-Zip: ORLANDO, FL 32854 US

Title: VP ( ) Delete  
Name: LONG, ANNIE  
Address: PO BOX 547124  
City-St-Zip: ORLANDO, FL 32854 US

Title: SEC ( ) Delete  
Name: MCGIRT, PRIMESHA  
Address: 982 W. BREVARD ST APT G4  
City-St-Zip: TALLAHASSEE, FL 32304 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change ( ) Addition  
Name: MCGIRT, PRIMESHA  
Address: PO BOX 547124  
City-St-Zip: ORLANDO, FL 32854 US

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: LASHUNDA JONES

P

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date