

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000129887

**Entity Name:** HOFF MANAGEMENT, INC.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

20 N. BRIDGE LANE  
KEY LARGO, FL 33037

**New Principal Place of Business:**

**Current Mailing Address:**

24 DOCKSIDE LANE # 136  
KEY LARGO, FL 33037

**New Mailing Address:**

**FEI Number:** 26-1555292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOFF, MARY  
20 N. BRIDGE LANE  
KEY LARGO, FL 33037 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

**OFFICERS AND DIRECTORS:**

Title: DVTS  
Name: HOFF, MARY  
Address: 20 N. BRIDGE LANE  
City-St-Zip: KEY LARGO, FL 33037

Title: DP  
Name: HOFF, KENNETH  
Address: 20 N. BRIDGE LANE  
City-St-Zip: KEY LARGO, FL 33037

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: MARY HOFF

DVTS

01/06/2012

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

\_\_\_\_\_  
Date