2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# P08000081045

Entity Name: HOUSE MANAGEMENT GROUP, INC.

Current Principal Place of Business:

5151 ADANSON STREET
SUITE 103
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

5151 ADANSON STREET
SUITE 103
ORLANDO, FL 32804 US

New Mailing Address:

FEI Number: 26-3295351 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOUSE, GARY A
5151 ADANSON STREET
SUITE 103
ORLANDO,, FL 32804 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:	HOUSE, GARY A	
Address:	5151 ADANSON STREET, SUITE 103	
City-St-Zip:	ORLANDO, FL 32804 US	
Title:	VP	( ) Delete
Name:	HOUSE, GARY A	
Address:	5151 ADANSON STREET, SUITE 103	
City-St-Zip:	ORLANDO, FL 32804 US	
Title:	T	( ) Delete
Name:	HOUSE, GARY A	
Address:	5151 ADANSON STREET, SUITE 103	
City-St-Zip:	ORLANDO, FL 32804 US	
Title:	S	( ) Delete
Name:	HOUSE, GARY A	
Address:	5151 ADANSON STREET, SUITE 103	
City-St-Zip:	ORLANDO, FL 32804 US	
Title:	D	( ) Delete
Name:	BANTA, SCOTT	
Address:	P.O. BOX 520021	
City-St-Zip:	LONGWOOD, FL 32752 US	
Title:	D	( ) Delete
Name:	SHARKEY, COLLEEN	
Address:	P. O. BOX 950593	
City-St-Zip:	LAKE MARY, FL 32795 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: GARY HOUSE MR. 02/18/2009

Electronic Signature of Signing Officer or Director Date