

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000071162

FILED
Mar 22, 2009
Secretary of State

Entity Name: HONEY POT BOUTIQUE INC.

Current Principal Place of Business:

18542 U S HWY 19 N
SUITE 2
CLEARWATER, FL 33764

New Principal Place of Business:

2945 EAST BAY DRIVE
SUITE A
LARGO, FL 33771

Current Mailing Address:

18542 U S HWY 19 N
SUITE 2
CLEARWATER, FL 33764

New Mailing Address:

2945 EAST BAY DRIVE
SUITE A
LARGO, FL 33771

FEI Number: 59-3270595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOON, SHERRY L
1640 PATLIN CIRCLE SOUTH
LARGO, FL 33770 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: PTD () Delete
Name: NOON, SHERRY L
Address: 1640 PATLIN CIRCLE SOUTH
City-St-Zip: LARGO, FL 33770

Title: VSD () Delete
Name: NOON, DAVID
Address: 1640 PATLIN CIRCLE SOUTH
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SHERRY NOON

PTD

03/22/2009

Electronic Signature of Signing Officer or Director

Date