2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# P95000004551

Entity Name: OLD HARBOUR MINERALS INC.

Current Principal Place of Business:

3700 HULEN STREET
FORT WORTH, TX 76107

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 985004
FORT WORTH, TX 761855004

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: DC ( ) Delete
Name: JEAN-PIERRE, BERGHMANS
Address: 3700 HULEN STREET
City-St-Zip: FORT WORTH, TX 76107

Title: PD ( ) Delete
Name: FRASER, CHRISTOPHER T
Address: 3700 HULEN STREET
City-St-Zip: FORT WORTH, TX 76107

Title: D ( ) Delete
Name: LHOIST, LEON A
Address: 3700 HULEN ST
City-St-Zip: FORT WORTH, TX 76107

Title: V ( ) Delete
Name: RODRIGUEZ, MARCELINO
Address: 3700 HULEN ST
City-St-Zip: FORT WORTH, TX 76107

Title: T (X) Delete
Name: NORDIN, BOB
Address: 3700 HULEN ST
City-St-Zip: FORT WORTH, TX 76107

Title: S (X) Delete
Name: CURTISS, KENNETH E
Address: 3700 HULEN ST
City-St-Zip: FORT WORTH, TX 76107

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DE MOT, LUDWIG
Address: 3700 HULEN STREET
City-St-Zip: FORT WORTH, TX 76107

Title: T (X) Change ( ) Addition
Name: NORDIN, BOB
Address: 3700 HULEN STREET
City-St-Zip: FORT WORTH, TX 76107

Title: S (X) Change ( ) Addition
Name: CURTISS, KENNETH E
Address: 3700 HULEN ST
City-St-Zip: FORT WORTH, TX 76107

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: BOB NORDIN TRES 04/23/2009
Electronic Signature of Signing Officer or Director Date