

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000040324

Entity Name: EAST HILL HOLDINGS, INC.

FILED
May 04, 2009
Secretary of State

Current Principal Place of Business:

12 NW 5TH PLACE
WILLISTON, FL 32696 US

New Principal Place of Business:

1935 RIVER LAGOON TRACE
ST AUGUSTINE, FL 32092 US

Current Mailing Address:

PO BOX 47347
JACKSONVILLE, FL 32247 US

New Mailing Address:

1935 RIVER LAGOON TRACE
ST AUGUSTINE, FL 32092 US

FEI Number: 59-3439883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCANN, RICHARD E JR
1935 RIVER LAGOON TRACE
ST. AUGUSTINE, FL 32092 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSC () Delete
Name: MCCANN, RICHARD E JR
Address: 1935 RIVER LAGOON TRACE
City-St-Zip: ST AUGUSTINE, FL 32092

Title: D () Delete
Name: MCCANN, SALLY P
Address: 2724 ALVERADO AVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: MCCANN, RICHARD E
Address: 2724 ALVERADO AVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: BETHANNE, MCCANN
Address: 1935 RIVER LAGOON TRACE
City-St-Zip: ST AUGUSTINE, FL 32092

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:

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: RICHARD E MCCANN, JR.

P

05/04/2009

Electronic Signature of Signing Officer or Director

_____ Date