

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000053564

FILED
Jan 20, 2009
Secretary of State

Entity Name: RICHARD HUFF GENERAL CONTRACTOR, INC.

Current Principal Place of Business:

16975 HAMMOCK LN
PORT SAINT LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

16975 HAMMOCK LN
PORT SAINT LUCIE, FL 34987

New Mailing Address:

FEI Number: 65-0768092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUFF, RICHARD SR.
16975 HAMMOCK LN
PT ST LUCIE, FL 34987 US

Name and Address of New Registered Agent:

HUFF, RICHARD SR.
16975 HAMMOCK LN
PORT ST LUCIE, FL 34987 US

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

01/20/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: HUFF, SYLVIA N
Address: 16975 HAMMOCK LN
City-St-Zip: PORT SAINT LUCIE, FL 34987

Title: P () Delete
Name: HUFF, RICHARD SR.
Address: 16975 HAMMOCK LN
City-St-Zip: PORT SAINT LUCIE, FL 34987

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES (X) Change () Addition
Name: HUFF, RICHARD E SR.
Address: 16975 HAMMOCK LN
City-St-Zip: PORT SAINT LUCIE, FL 34987

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: SYLVIA N. HUFF

Electronic Signature of Signing Officer or Director

VP

01/20/2009

Date