

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080315

Entity Name: HWL INC.

FILED  
Mar 01, 2010  
Secretary of State

**Current Principal Place of Business:**

2015 WESTBOURNE DRIVE  
OVIEDO, FL 32765

**New Principal Place of Business:**

2625 TURTLEHEAD COVE  
OVIEDO, FL 32766

**Current Mailing Address:**

PO BOX 620190  
OVIEDO, FL 32762

**New Mailing Address:**

FEI Number: 59-3470759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LABITA, AMY  
2015 WESTBOURNE DRIVE  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

LABITA, AMY  
2625 TURTLEHEAD COVE  
OVIEDO, FL 32766 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

03/01/2010

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LABITA, WILLIAM  
Address: 2625 TURTLEHEAD COVE  
City-St-Zip: OVIEDO, FL 32766

Title: C  
Name: LABITA, AMY  
Address: 2625 TURTLEHEAD COVE  
City-St-Zip: OVIEDO, FL 32766

I hereby 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 all other like empowered.

SIGNATURE: AMY LABITA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MRS

03/01/2010

\_\_\_\_\_  
Date