

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000000385

Entity Name: MULE, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

315 DOGWOOD DRIVE  
HAVANA, FL 32333

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 767  
HAVANA, FL 32333

## New Mailing Address:

315 DOGWOOD DRIVE  
HAVANA, FL 32333

FEI Number: 59-3483895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLLINS, FRED H  
315 DOGWOOD DRIVE  
HAVANA, FL 32333 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: PV ( ) Delete  
Name: BATES, BEN  
Address: POST OFFICE BOX 767  
City-St-Zip: HAVANA, FL 32333

Title: D ( ) Delete  
Name: BATES, BEN  
Address: POST OFFICE BOX 767  
City-St-Zip: HAVANA, FL 32333

Title: ST (X) Delete  
Name: COLLINS, FRED H  
Address: POST OFFICE BOX 767  
City-St-Zip: HAVANA, FL 32333

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change ( ) Addition  
Name: BATES, BEN  
Address: 315 DOGWOOD DRIVE  
City-St-Zip: HAVANA, FL 32333

Title: ST (X) Change ( ) Addition  
Name: COLLINS, FRED H  
Address: 315 DOGWOOD DRIVE  
City-St-Zip: HAVANA, FL 32333

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: FRED H COLLINS

ST

04/27/2009

Electronic Signature of Signing Officer or Director

Date