

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086822

Entity Name: HEWLETT ENTERPRISES, INC.

FILED  
Mar 17, 2008  
Secretary of State

**Current Principal Place of Business:**

815 100 STREET  
MARATHON, FL 33050

**New Principal Place of Business:**

**Current Mailing Address:**

815 100 STREET  
MARATHON, FL 33050

**New Mailing Address:**

FEI Number: 65-0955898      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HEWLETT, GLENN H  
815 100 ST OCEAN  
MARATHON, FL 33050      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: P ( ) Delete  
Name: HEWLETT, GLENN H JR  
Address: 815 100 STREET-OCEAN  
City-St-Zip: MARATHON, FL 33050

Title: ST ( ) Delete  
Name: HEWLETT, BARBARA  
Address: 815 100 STREET-OCEAN  
City-St-Zip: MARATHON, FL 33050

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: BARBARA HEWLETT

SEC

03/17/2008

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

\_\_\_\_\_ Date