

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S95592

Entity Name: ROOF HUGGER, INC.

FILED  
Feb 22, 2009  
Secretary of State

**Current Principal Place of Business:**

144 B WHITAKER RD  
LUTZ, FL 33549 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1027  
ODESSA, FL 335561027 US

**New Mailing Address:**

FEI Number: 59-3092471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NELSON DALE G  
18440 WAYNE RD  
ODESSA, FL 33556 US

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

NELSON, DALE G PRES  
18440 WAYNE RD  
ODESSA, FL 33556 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: DALE G. NELSON

02/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: NELSON, DALE  
Address: 18440 WAYNE RD  
City-St-Zip: ODESSA, FL 33556

Title: D ( ) Delete  
Name: MCCONNOHIE, D V  
Address: 12714 N. PADDOCK  
City-St-Zip: TAMPA, FL 33618

**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: DALE G. NELSON

PRES

02/22/2009

Electronic Signature of Signing Officer or Director

Date