

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V28167

FILED
Jan 21, 2009
Secretary of State

Entity Name: HANEY & DAUGHTERS, INC.

Current Principal Place of Business:

1958 ROLLING GREEN CIR
SARASOTA, FL 34240 US

New Principal Place of Business:

7531 S. LEEWYN DR
SARASOTA, FL 34240 US

Current Mailing Address:

P.O. BOX 7551
SARASOTA, FL 34278

New Mailing Address:

FEI Number: 65-0339444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, DONNA R.
7531 S LEEWYNN DR
SARASOTA, FL 34240 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: PS () Delete
Name: WILLIAMS, DONNA R.,
Address: 7531 S LEEWYNN DR.
City-St-Zip: SARASOTA, FL 34240

Title: VAS () Delete
Name: THOMAS, DENISE L.
Address: 1962 ROLLING GREEN CIR.
City-St-Zip: SARASOTA, FL 34240

Title: VT () Delete
Name: THOMAS, JOHN E
Address: 1962 ROLLING GREEN CIR.
City-St-Zip: SARASOTA, FL 34240

Title: CCEO () Delete
Name: HANVEY, RANDY S
Address: 1958 ROLLING GREEN CIR.
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: WILLIAMS, DONNA P
Address: 7531 S LEEWYNN DR.
City-St-Zip: SARASOTA, FL 34240

Title: VAS (X) Change () Addition
Name: THOMAS, DENISE L.
Address: 10 ARLINGTON COURT
City-St-Zip: ROME, GA 30165

Title: VT (X) Change () Addition
Name: THOMAS, JOHN E
Address: 10 ARLINGTON COURT
City-St-Zip: ROME, GA 30165

Title: CCEO (X) Change () Addition
Name: HANVEY, RANDY S
Address: P.O. BOX 7551
City-St-Zip: SARASOTA, FL 34278

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: DONNA WILLIAMS

P

01/21/2009

Electronic Signature of Signing Officer or Director

_____ Date