2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K09619

Entity Name: HY-BYRD INCORPORATED

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 511 EAST COAST ST SO LAKE WORTH, FL 33460 **Current Mailing Address: New Mailing Address:** 511 EAST COAST ST SO LAKE WORTH, FL 33460 US FEI Number: 65-0060264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CRISAFULLE, JOSEPH 2521 DONELLY DRIVE LAKE WORTH, FL 33462 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CRISAFULLE, JOSEPH CRISAFULLE, JOSEPH SR Name: Name: 2521 DONNELLY DR. 2521 DONNELLY DR. Address: Address: LANTANA, FL City-St-Zip: City-St-Zip: LANTANA, FL

Title: STD () Delete Title: () Change () Addition
Name: HOWELL TAMMY Name:

 Name:
 HOWELL, TAMMY
 Name:

 Address:
 12029 56TH PLACE
 Address:

 City-St-Zip:
 ROYAL PALM BEACH, FL 33441
 City-St-Zip:

Title: V () Delete Title: V (X) Change () Addition

Name: CRISAFULLE, MICHAEL Name: CRISAFULLE, MICHAEL

Address: 3501 VILLAGE BOULEVARD #102 Address: 2421 VILLAGE BOULEVARD #201
City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH CRISAFULLE, SR PD 01/04/2007