

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S27187

Entity Name: HYBRID SOURCES, INC.

FILED
Jan 27, 2009
Secretary of State

Current Principal Place of Business:

2950 43RD AVENUE
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

2950 43RD AVENUE
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 65-0315432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDWELL, WILLIAM W
756 BEACHLAND BLVD
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

VOGEL, ARLENE N MS.
2950 43RD AVENUE
VERO BEACH, FL 32960 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: ARLENE N VOGEL

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VOGEL, RICHARD,
Address: 1960 OCEAN RIDGE DR
City-St-Zip: VERO BCH, FL

Title: D () Delete
Name: VOGEL, ARLENE N,
Address: 1960 OCEAN RIDGE DR
City-St-Zip: VERO BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VOGEL, RICHARD A MR.
Address: 2950 43RD AVENUE
City-St-Zip: VERO BEACH, FL 32960

Title: D (X) Change () Addition
Name: VOGEL, ARLENE N MS.
Address: 2950 43RD AVENUE
City-St-Zip: VERO BEACH, FL 32960

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: ARLENE N VOGEL

MS.

01/27/2009

Electronic Signature of Signing Officer or Director

Date