2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005101

FILED Jan 15, 2009 Secretary of State

Entity Nam	ie: B.B. HOBE	SS, INC.			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	Y BYRD HIGH ON, SC 29540				
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
PO BOX 11 DARLINGTO	47 ON, SC 29540				
FEI Number:	57-0927329	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Addres	Name and Address of New Registered Agent:	
SHADE, BRYAN HOWARD 7843 NATURE TRAIL LAKELAND, FL 33809 US			1611 18TH AVENU	MARCHETTE, JACK 1611 18TH AVENUE DR. E PALMETTO, FL 34221 US	
The above in the State		ubmits this statement for the pu	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: JACK MARCHETTE				01/15/2009	
Electronic Signature of Registered Agent Date					
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () I HOBBS, BRYAN 305 E. HAMPTOI DARLINGTON, S	N ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD ()[HOBBS, PATRIC 305 E. HAMPTOI DARLINGTON, S	N ST	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BRYAN HOBBS PD 01/15/2009