2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # 120800



FILED Jul 02, 2007 8:00 am Secretary of State

1. Entity Nam	HILL FARMS, INC.						07-02-200	7 90030	011 3	30.00
Principal Plac	e of Business	Mailing A	ddress			1				
35 N. WYNDEN DR.			35 N. WYNDEN DR. HOUSTON, TX 77056							
2. Principal F	Place of Business - No P.O. Box	# 3. Mailing	Address							
Suite, Apt. #, etc.		Suite, A	Suite, Apt. #, etc.			04102007	Chg-P	CR2E0	34 (12/06)	
City & State		City &	City & State			4. FEI Numbe 74-604			<u> </u>	pplied For
Zip Country :		Zip	Zip Country		try	5. Certificate	of Status Desired		\$8.75 Add Fee Require	
·	6. Name and Address of C	urrent Registered	Agent		No.	7. Name and	Address of New F	Registered A	gent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD					Name Street Address ((P.O. Box Numbe	er is Not Acceptabl	e)	 .	
	ION, FL 33324								<u></u>	
					City			FL	Zip Code	е
	named entity submits this state tions of registered agent.	ment for the purpos	e of changing its	s register	ed office or registe	red agent, or bo	th, in the State of Fi	orida. I am f	amiliar with,	and accept
SIGNATURE.	Signature, typed or printed name of registe	red agent and title if applica	ble. (NO	iE: Registere	d Agent signature required	d when reinstating)		DATE		
										!
	E NOW!!! FEE IS \$150. ay 1, 2007 Fee will be \$	00	Election Campa Trust Fund Con			.00 May Be ded to Fees				
	ay 1, 2007 Fee will be s	00	Trust Fund Con			led to Fees	CHANGES TO OFF	ICERS AND	DIRECTORS	S IN 11
After M 10. TITLE	ay 1, 2007 Fee will be s	\$550.00	Trust Fund Con	11.	Add	led to Fees	CHANGES TO OFF	FICERS AND	DIRECTOR:	S IN 11
After M 10. TITLE NAME	OFFICER D OWEN, JANE B.	\$550.00	Trust Fund Con	11.	Add	led to Fees	CHANGES TO OFF	FICERS AND		
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Indicated on this report or supplied with this filling does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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