2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 203155

Entity Name: HUGH H BRANCH INC

FILED Jan 19, 2007 Secretary of State

Littly Na	ille. Hoom h. i	SKANCH, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	TE ROAD 15 .ADE, FL 33430	US		
Current Mailing Address:			New Mailing Address:	
PO BOX 5 PAHOKEE		JS		
FEI Number	: 59-0804813	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:	
The above	RIVE TON, FL 33476 a named entity su	US $_{ m lbmits}$ this statement for the μ	ourpose of changing its registere	d office or registered agent, or both,
	e of Florida. 			
SIGNATUI		Signature of Registered Age	ont	 Date
Election Car		Trust Fund Contribution ().	one	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ()[BRANCH, HUGH 13776 SOUTHWI OKEECHOBEE,	EST 16TH DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ST ()[HERRING, DANIE 1009 NORTHEAS BELLE GLADE, F	ST 1ST STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPD ()[BERGMANN, BR 13646 CALLINGT WELLINGTON, F	ON DR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPD ()[SHIVER, DANIEL 807 IVY DRIVE WELLINGTON, F		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPD ()[STAFFORD, GAR 13837 GERANIU WELLINGTON, F	M PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition

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: DANIEL R. HERRING ST 01/19/2007