

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 429417

FILED  
Apr 13, 2012  
Secretary of State

**Entity Name:** HILE'S CURTAIN SPECIALTIES, INC.

**Current Principal Place of Business:**

2701 SUCCESS DR.  
ODESSA, FL 33556 US

**New Principal Place of Business:**

**Current Mailing Address:**

2701 SUCCESS DR.  
ODESSA, FL 33556 US

**New Mailing Address:**

**FEI Number:** 59-1469305

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILE, CHARLES E  
2701 SUCCESS DRIVE  
ODESSA, FL 33556 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HILE, CLAYTON E  
Address: 3217 CHALON ST  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: CEO  
Name: HILE, CHARLES E  
Address: 1125 BLUEFIELD RD  
City-St-Zip: ODESSA, FL 33556 US

Title: V  
Name: HILE, CARSON E  
Address: 9736 OAK STREET  
City-St-Zip: TAMPA, FL 33630 US

Title: ST  
Name: SMITH, CINDY E  
Address: 15910 ANTLER LANE  
City-St-Zip: SPRING HILL, FL 34610 US

I hereby 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 all other like empowered.

SIGNATURE: CINDY E SMITH

ST

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date