2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# 568534

Entity Name: FOLEY A. HOOPER, INC.

Current Principal Place of Business:

1685 KILLIAN COURT
APOPKA, FL 32712

New Principal Place of Business:

1685 KILLEAN COURT
APOPKA, FL 32712

Current Mailing Address:

1685 KILLIAN COURT
APOPKA, FL 32712 US

New Mailing Address:

1685 KILLEAN COURT
APOPKA, FL 32712 US

FEI Number: 59-1797184 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOOPER, ROBERT M
1685 KILLEARN CT
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

HOOPER, ROBERT M
1685 KILLEAN CT
APOPKA, FL 32712 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: _____ 04/22/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HOOPER, ROBERT M
Address: 1685 KILLEAN CT.
City-St-Zip: APOPKA, FL 32712

Title: VP ( ) Delete
Name: HOOPER, ROBERT M
Address: 1685 KILLEAN CT
City-St-Zip: APOPKA, FL 32712

Title: SD ( ) Delete
Name: HOOPER, DAPHNE M
Address: 1685 KILLEAN CT
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete
Name: HOOPER, ROBERT M JR
Address: 1400 LAKE SHADOW CIRCLE #10205
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HOOPER, ROBERT M
Address: 1685 KILLEAN COURT
City-St-Zip: APOPKA, FL 32712

Title: VP (X) Change ( ) Addition
Name: HOOPER, ROBERT M
Address: 1685 KILLEAN COURT
City-St-Zip: APOPKA, FL 32712

Title: SD (X) Change ( ) Addition
Name: HOOPER, DAPHNE M
Address: 1685 KILLEAN COURT
City-St-Zip: APOPKA, FL 32712

Title: D (X) Change ( ) Addition
Name: HOOPER, ROBERT M JR
Address: 1400 LAKE SHADOW CIRCLE, #10205
City-St-Zip: MAITLAND, FL 32751

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: ROBERT M HOOPER PD 04/22/2009
Electronic Signature of Signing Officer or Director — Date