2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 665376

Entity Name: HILLMAN JOLLEY & SON, INC.

FILED Jan 09, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4207 CR 218 WEST MIDDLEBURG, FL 32068

Current Mailing Address: New Mailing Address:

PO BOX 237 MIDDLEBURG, FL 32050

FEI Number: 59-1998479 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:

JOLLEY, WILLIAM L

199 DOLPHIN CIRCLE

MIDDLEBURG, FL 32068 US

JOLLEY, KANDY L

199 DOLPHIN CIRCLE

MIDDLEBURG, FL 32068 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: KANDY L. JOLLEY 01/09/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: JOLLEY, WILLIAM LEE, Name: JOLLEY, KANDY L

Address: 199 DOLPHIN CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Address: 199 DOLPHIN CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Address: 199 DOLPHIN CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Title: ST () Delete Title: T (X) Change () Addition Name: JOLLEY, TINA Name: JOLLEY, TINA

Address: 199 DOLPHIN CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Address: 30LLE1, 11WA
30LLE1, 11W

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 JOLLEY, CARLIE H

 Address:
 Address:
 199 DOLPHIN CIRCLE

 City-St-Zip:
 City-St-Zip:
 MIDDLEBURG, FL 32068

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KANDY LYNN JOLLEY P 01/09/2004