


FILE NOW: FILING FEE IS \$61.25

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Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90076 036 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 706434

1. Corporation Name

H & H SUPPORT SERVICES, INC.

161149 - 90076 - 36

Principal Place of Business
 702 SOUTH WASHBURN AVENUE
 CORONA CA 91720

Mailing Address
 702 SOUTH WASHBURN AVENUE
 CORONA CA 91720



2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 11/15/1963
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-0657867
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE		NOTE: Registered Agent signature required when reinstating		DATE	
12. OFFICERS AND DIRECTORS					
TITLE	S	<input type="checkbox"/> DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME	HANSON, CALVIN		1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	5336 PEACOCK LANE		1.2 NAME		
CITY-ST-ZIP	RIVERSIDE CA 92505		1.3 STREET ADDRESS		
TITLE	PVD	<input type="checkbox"/> DELETE	1.4 CITY-ST-ZIP		
NAME	COY, ROBERT E. J.D.		2.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1916 DANA DRIVE		2.2 NAME		
CITY-ST-ZIP	ADELPHI MD 20783		2.3 STREET ADDRESS		
TITLE	VD	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP		
NAME	SANDEFUR, CHARLES		3.1 TITLE	C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8650 PIONEERS BLVD		3.2 NAME		
CITY-ST-ZIP	LINCOLN NE 68520		3.3 STREET ADDRESS		
TITLE	D	<input type="checkbox"/> DELETE	3.4 CITY-ST-ZIP		
NAME	ANDERSON, O.D.		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	777 EAST 25TH, 316		4.2 NAME		
CITY-ST-ZIP	HIALEAH FL 33013		4.3 STREET ADDRESS		
TITLE	T	<input checked="" type="checkbox"/> DELETE	4.4 CITY-ST-ZIP		
NAME	BROWN, GEORGE W		5.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2711 NORTH POMELO DRIVE		5.2 NAME	Ellen H. Brodersen, CPA	
CITY-ST-ZIP	AVON PARK FL 33013		5.3 STREET ADDRESS	92 N. Liberty Street	
TITLE	D	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	Harrisonburg, VA 22801	
NAME	MACOMBER, ROBERT D		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5408 PEACOCK LANE		6.2 NAME		
CITY-ST-ZIP	RIVERSIDE CA 92505		6.3 STREET ADDRESS		
			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SIGNATURE REQUIRED** Robert E. Coy, President 909-736-6909 2/15/99

CR2E037 (1/98)