

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 706434

1. Entity Name

H & H SUPPORT SERVICES, INC.

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-0657867

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Delete
S HANSON, CALVIN
STREET ADDRESS 5336 PEACOCK LANE
CITY-ST-ZIP RIVERSIDE CA 92505

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
P COY, ROBERT E. J.D.
STREET ADDRESS 201 LEASON COVE DRIVE
CITY-ST-ZIP LUSBY MD 20657

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
C SANDEFUR, CHARLES
STREET ADDRESS 8317 WATER TOWER CR
CITY-ST-ZIP LINCOLN NE 68520

TITLE NAME ☒ Change ☐ Addition
Chairman Sandefur, Charles C.
STREET ADDRESS 12501 Old Columbia Pike
CITY-ST-ZIP Silver Spring, MD 20904-6600

TITLE NAME ☐ Delete
D ANDERSON, O.D.
STREET ADDRESS 777 EAST 25TH, 316
CITY-ST-ZIP HIALEAH FL 33013

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
T BRODERSEN, ELLEN H CPA
STREET ADDRESS 92 N. LIBERTY STREET
CITY-ST-ZIP HARRISBURG VA 22801

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
D MACOMBER, ROBERT D
STREET ADDRESS 5408 PEACOCK LANE
CITY-ST-ZIP RIVERSIDE CA 92505

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert E. Coy, J.D. Pres.

4/5/02

909-736-6909

Date

Daytime Phone #

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90050 004 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)