## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000000700

Entity Name: HOBBS & FORD, INC.

FILED Apr 18, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3695 WHITE PINE CT. SARASOTA, FL 34238 **Current Mailing Address: New Mailing Address:** 4314 CRELIN PLACE 4314 CRELIN PLACE LANHAM, MD LANHAM, MD 20706 FEI Number: 52-2349744 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCREARY, HARRIET MCCREARY, HARRIET H PRES 3695 WHITE PINE CT. 3695 WHITE PINE CT. SARASOTA, FL 34238 US SARASOTA, FL 34238 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: HARRIET H MCCREARY 04/18/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition MCCREARY, HARRIET H Name: Name: 3695 WHITE PINE CT. Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: GASKILL, STEPHANIE J Name: 28 POCHET RD. Address: Address: ORLEANS, MA 02653 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

Ρ SIGNATURE: HARRIET H MCCREARY 04/18/2007