2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001095

Entity Name: HICKS-BURDEN, INC.

FILED Apr 27, 2009 Secretary of State

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Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business: 1604 N. KAUFMAN ST. ENNIS, TX 75119 US New Mailing Address:		
	STERRETT CHIE, TX 7516	65				
Current M	lailing Addres	s:	New Maili			
214 EAST STERRETT WAXAHACHIE, TX 75165				1604 N. KAUFMAN STREET ENNIS, TX 75119 US		
FEI Number	: 75-2831303	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and	l Address	of New Registered Agent:	
1200 SOU	PORATION SYS TH PINE ISLAI ION, FL 33324	ND ROAD				
	named entity se of Florida.	submits this statement for the	purpose of changing	its register	ed office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CPT () BURDEN, FRAI 214 EAST STEI WAXAHACHIE,	RRETT	Title: Name: Address: City-St-Zip:		(X) Change () Addition AUFMAN STREET 75119 US	
Title: Name: Address: City-St-Zip:	VCVP () BURDEN, G.A. 214 EAST STEI WAXAHACHIE,		Title: Name: Address: City-St-Zip:		(X) Change()Addition AUFMAN STREET 、75119 US	
Title: Name: Address: City-St-Zip:	S () BUCK, TINA CC 214 EAST STEI WAXAHACHIE,	RRETT	Title: Name: Address: City-St-Zip:		(X) Change()Addition AUFMAN STREET 、75119 US	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: Citv-St-Zip:		() Change (X) Addition AUFMAN STREET (75119 US	

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: TINA BUCK S 04/27/2009