

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F61058

**FILED**  
**Jan 25, 2010**  
**Secretary of State**

**Entity Name:** HICKS FEED AND GARDEN CENTER, INC.

**Current Principal Place of Business:**

% ANDREW MARSHALL HICKS  
1114 S JEFFERSON ST  
PERRY, FL 32348

**New Principal Place of Business:**

**Current Mailing Address:**

% ANDREW MARSHALL HICKS  
1114 S JEFFERSON ST  
PERRY, FL 32348

**New Mailing Address:**

**FEI Number:** 59-2147702      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HICKS, ANDREW MARSHALL  
1114 S JEFFERSON STREET  
PERRY, FL 32348 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PST  
**Name:** HICKS, ANDREW MARSHALL  
**Address:** 1114 S. JEFFERSON ST  
**City-St-Zip:** PERRY, FL 32348

**Title:** D  
**Name:** HICKS, ANDREW MARSHALL  
**Address:** 1114 S. JEFFERSON ST  
**City-St-Zip:** PERRY, FL 32348

**Title:** VP  
**Name:** HICKS, BILLIE SUE  
**Address:** 1114 S JEFFERSON ST  
**City-St-Zip:** PERRY, FL 32348

I hereby 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 all other like empowered.

**SIGNATURE:** ANDREW MARSHALL HICKS

PST

01/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date