

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Mar 11, 2009
Secretary of State**

DOCUMENT# F95000006325

Entity Name: H & M BAY, INC.

Current Principal Place of Business:

1800 INDUSTRIAL PARK DRIVE
FEDERALSBURG, MD 21632

New Principal Place of Business:

Current Mailing Address:

P O BOX 280 INDUSTRIAL PARK DRIVE
FEDERALSBURG, MD 21632 US

New Mailing Address:

1800 INDUSTRIAL PARK DRIVE
FEDERALSBURG, MD 21632

FEI Number: 52-1930791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: HAYMAN, LAWRENCE
Address: 1800 INDUSTRIAL PARK DRIVE
City-St-Zip: FEDERALSBURG, MD 21632

Title: DP () Delete
Name: MESSICK, WALTER
Address: 1800 INDUSTRIAL PRK DRIVE
City-St-Zip: FEDERALSBURG, MD 21632

Title: S () Delete
Name: BURNETT, K. KING
Address: 1800 INDUSTRIAL PARK DR
City-St-Zip: FEDERALSBURG, MD 21632

Title: CFO () Delete
Name: NULPH, ALFRED P CFO
Address: 1800 INDUSTRIAL PARK DR
City-St-Zip: FEDERALSBURG, MD 21632

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALFRED P NULPH

CFO

03/11/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date