

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H77315

FILED
Apr 24, 2008
Secretary of State

Entity Name: ROBERT HINEBAUGH, INC.

Current Principal Place of Business:

ROBERT HINEBAUGH, INC.
3102 ENTERPRISE RD
FT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

ROBERT HINEBAUGH, INC.
P.O. BOX 13571
FT PIERCE, FL 34979 US

New Mailing Address:

FEI Number: 59-2579180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, MARVIN
3102 ENTERPRISE RD
FT PIERCE, FL 34982 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: PD () Delete
Name: KELLY, MARVIN
Address: 11600 TWIN CREEKS DR
City-St-Zip: FT PIERCE, FL

Title: VD () Delete
Name: KELLY, MARGO
Address: 3102 ENTERPRISE RD
City-St-Zip: FT PIERCE, FL

Title: STD () Delete
Name: KELLY, KYLE
Address: 11600 TWIN CREEKS DR
City-St-Zip: FT PIERCE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KELLY, MARVIN
Address: 11600 TWIN CREEKS DR
City-St-Zip: FT PIERCE, FL 34945

Title: VD (X) Change () Addition
Name: KELLY, MARGO
Address: 3102 ENTERPRISE RD
City-St-Zip: FT PIERCE, FL 34982

Title: STD (X) Change () Addition
Name: KELLY, KYLE
Address: 11600 TWIN CREEKS DR
City-St-Zip: FT PIERCE, FL 34945

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: KYLE D. KELLY

STD

04/24/2008

Electronic Signature of Signing Officer or Director

_____ Date