

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L06012

Entity Name: HALE GROUP, INC.

FILED  
Jan 10, 2009  
Secretary of State

## Current Principal Place of Business:

C/O SUSAN HALE  
8965 PALM BREEZE TERR  
VERO BEACH, FL 32963

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 700547  
WABASSO, FL 32970 US

## New Mailing Address:

P.O. BOX 700247  
WABASSO, FL 32970 US

FEI Number: 65-0139535

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALE, SUSAN  
8965 PALM BREEZE TERR  
VERO BEACH, FL 32963 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: D ( ) Delete  
Name: HALE, STEPHEN C III  
Address: 1160 ADMIRALS WALK  
City-St-Zip: VERO BEACH, FL

Title: D ( ) Delete  
Name: HALE, SUSAN B  
Address: 8965 PALM BREEZE TERR  
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete  
Name: HALE, A. DEXTER  
Address: 305 HYLANDE DR  
City-St-Zip: GREAT FALLS, MT 59405

Title: D ( ) Delete  
Name: FARROW, MARIANNE H  
Address: THE MANOR, STAVERTON  
City-St-Zip: NORTHAMPTONSHIRE EN,

## 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: SUSAN B. HALE

D

01/10/2009

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

\_\_\_\_\_  
Date