cert. 7005 1820 0004 3210 7787

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # L33783

1. Entity Name
SEDONA INVESTMENT GROUP, INC.

Principal Place of Business	Mailing Address
2631-A NW 41ST ST GAINESVILLE, FL 32606 US	PO BOX 976 CRYSTAL RIVER, FL 34423-0976 US

DO NOT WRITE IN THIS SPACE

04232008   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-2985304	Applied For
	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent
HUBBARD, JEREMIAH A. 2631-A NW 41ST ST GAINESVILLE, FL 32606

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

U00000945729
05/30/08 00021 004 150.00

10.	OFFICERS AND DIRECTORS
TITLE	P
NAME	HUBBARD, JEREMIAH A.
STREET ADDRESS	2631-A NW 41ST ST
CITY-ST-ZIP	GAINESVILLE, FL 32606
TITLE	ST
NAME	HUBBARD, TANA WITTE
STREET ADDRESS	2631-A NW 41ST ST
CITY-ST-ZIP	GAINESVILLE, FL 32606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Tana W. Hubbard   4/28/08   (352) 795-4998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #