

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L59813

Entity Name: H.D. HI LIFE, INC.

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

% BERRIEN BECKS, JR.  
125 NORTH RIDGEWOOD AVENUE  
DAYTONA BEACH, FL 321143258

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10689  
DAYTONA BEACH, FL 32120

**New Mailing Address:**

FEI Number: 59-2998919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BECKS, BERRIEN JR  
125 NORTH RIDGEWOOD AVENUE  
DAYTONA BEACH, FL 32114 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: PD  
Name: BECKS, BERRIEN, JR  
Address: 125 N. RIDGEWOOD AVE.  
City-St-Zip: DAYTONA BCH, FL

Title: VPS  
Name: BECKS, BERRIEN H. SR.  
Address: 125 N. RIDGEWOOD AVE.  
City-St-Zip: DAYTONA BCH, FL

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: BERRIEN BECKS, JR.

PRES

01/19/2012

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

\_\_\_\_\_  
Date