2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 24, 2008 08:00 AN Secretary of State

DOCL	JMENT	T# M9	7318
------	-------	-------	------

1. Entity Name

HILLIARD BROS. OF VOLUSIA COUNTY, INC.



Principal Place of Business

5236 S. RIDGEWOOD AVE. DAYTONA BEACH, FL 32127 Mailing Address

229 SANDY CIRCLE

SOUTH DAYTONA, FL 32119



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01182008 No Chg-P

4. FEI Number 59-2912459

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILLIARD, RICHARD W.

DO NOT WRITE

DAYTONA BEACH, FL 32127		IN THIS SPACE			
	named entity submits this statement for the pricions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title it	applicable. (NOTE: Registered A	gent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financia Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS HILLIARD, RICHARD W. 5236 S. RIDGEWOOD AVE. DAYTONA BEACH, FL 32127		٠		Hooggoggggg
TITLE NAME STREET ADDRESS CITY-ST-ZIP					000000795837 01/29/08-80008-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		······································			

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 attachgrent with an address, with all other like empowered.

SIGNATURE:

Hilliard