2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N06000007380

Entity Name: H.Y.P.E., INC.

Current Principal Place of Business:

5025 SHALE RIDGE TRAIL
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

5025 SHALE RIDGE TRAIL
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 20-5474015 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BUSINESS ENTERPRISES GROUP
5031 SHALE RIDGE TRAIL
ORLANDO, FL 32818 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: P ( ) Delete
Name: DANNER, SAMUEL L SR.
Address: 5025 SHALE RIDGE TRAIL
City-St-Zip: ORLANDO, FL 32818 US

Title: VP ( ) Delete
Name: DANNER, FELICIA L
Address: 5025 SHALE RIDGE TRAIL
City-St-Zip: ORLANDO, FL 32818 US

Title: P ( ) Delete
Name: BURNETT, ADA DR.
Address: 3715 NORTH VALDOSTA ROAD #154
City-St-Zip: VALDOSTA, GA 31602 US

Title: S ( ) Delete
Name: HIGHTOWER, MARIA
Address: 431 WILDWOOD GLEN
City-St-Zip: STONE MOUNTAIN, GA 30083 US

Title: PR ( ) Delete
Name: AZZARITO, DAVID
Address: 6700 SCIMITAR AVE
City-St-Zip: ORLANDO, FL 32812 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: CARTER-INGE, GWENDOLYN
Address: P.O. BOX 677873
City-St-Zip: ORLANDO, FL 32867 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL L. DANNER, SR. P 04/30/2007

Electronic Signature of Signing Officer or Director — Date