2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002687

City-St-Zip: BAYONET POINT, FL 34667

FILED Apr 20, 2007 Secretary of State

Entity Nai	me: HMGSS	DUTH, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3425 SPINEY ROAD LAKELAND, FL 33810 US		3426 LORI LANE SOL LAKELAND, FL 3380°			
Current Mailing Address:			New Mailing Address:		
3425 SPINEY ROAD LAKELAND, FL 33810		US	3426 LORI LANE SOL LAKELAND, FL 3380°		
FEI Number: FEI Number Applied Fo		FEI Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	PAULE DOWS ROAD TON, FL 3348	6 US			
The above in the State	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V () KENNEDY, CHU P.O. BOX 1177 BOWLING GRE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () GRICE, RICKE 3426 LORI LAN LAKELAND, FL	ES	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () MASON, LEON 3425 SPINEY F LAKELAND, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SD () PHILLIPS, RAY 12108 LONGST		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: RICKEY GRICE 04/20/2007 TD