

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002687

FILED
Apr 25, 2008
Secretary of State

Entity Name: HMGS SOUTH, INC.

Current Principal Place of Business:

3426 LORI LANE SOUTH
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

3426 LORI LANE SOUTH
LAKELAND, FL 33801 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISNER, PAUL E
800 MEADOWS ROAD
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

RISNER, PAUL E
10325 NORTHWEST 63RD DR.
PARKLAND, FL 33076 US

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:

04/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: KENNEDY, CHUCK
Address: P.O. BOX 1177
City-St-Zip: BOWLING GREEN, FL 33834

Title: TD () Delete
Name: GRICE, RICKEY
Address: 3426 LORI LANE S
City-St-Zip: LAKELAND, FL 33801

Title: PD () Delete
Name: MASON, LEON
Address: 3425 SPINEY RD
City-St-Zip: LAKELAND, FL 33810

Title: SD () Delete
Name: PHILLIPS, RAYMOND F
Address: 12108 LONGSTRAP LANE
City-St-Zip: BAYONET POINT, FL 34667

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MASON, LEON
Address: 3425 SPINEY RD
City-St-Zip: LAKELAND, FL 33810

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

Title: PD (X) Change () Addition
Name: BALDRIDGE, ED
Address: PO BOX 6854
City-St-Zip: AVON PARK, FL 33826

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

Title: PD () Change (X) Addition
Name: SCHMIDT, MARTIN
Address: 1340 RICHWOOD CIR.
City-St-Zip: ROCKLEDGE, FL 32955

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: RICKEY GRICE

TD

04/25/2008

Electronic Signature of Signing Officer or Director

Date