2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019680

Entity Name: HILLARD CONSULTING GROUP, INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13191 STARKEY ROAD 13143 66TH STREET NORTH

LARGO, FL 33773 SUITE 6 LARGO, FL 33773

New Mailing Address: Current Mailing Address:

P.O. BOX 7358 13143 66TH STREET NORTH SEMINOLE, FL 33775 LARGO, FL 33773

FEI Number: 65-1080006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HILLARD, BENJAMIN E DPT HILLARD, BENJAMIN E DPT 13191 STARKEY RD 13143 66TH STREET NORTH SUITE 11 LARGO, FL 33773 LARGO, FL 33773 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: BENJAMIN HILLARD 05/01/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HILLARD, BENJAMIN E DPT HILLARD, BENJAMIN E DPT Name: Name: 11068 91ST TERRACE 13143 66TH STREET NORTH Address: Address: City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: LARGO, FL 33773

Title: DS Title: DS (X) Change () Addition () Delete Name: HILLARD, TAMBRA Name: HILLARD, TAMBRA

11068 91ST TERRACE Address: 13143 66TH STREET NORTH Address:

SEMINOLE, FL 33772 LARGO, FL 33773 City-St-Zip: City-St-Zip:

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

SIGNATURE: BENJAMIN HILLARD **DPT** 05/01/2009

Electronic Signature of Signing Officer or Director

Date