

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000034539

Entity Name: HCB VENTURES, PA

FILED
Mar 05, 2009
Secretary of State**Current Principal Place of Business:**1815 ATLANTIC PLACE
AMELIA ISLAND, FL 32034**New Principal Place of Business:****Current Mailing Address:**1815 ATLANTIC PLACE
AMELIA ISLAND, FL 32034**New Mailing Address:**

FEI Number: 02-0577827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:BENNETT, H CRAIG
1815 ATLANTIC PLACE
AMELIA ISLAND, FL 32034 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: D () Delete
Name: BENNETT, H CRAIG
Address: 1815 ATLANTIC PLACE
City-St-Zip: AMELIA ISLAND, FL 32034**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: BENNETT, HAROLD CRAIG
Address: 1815 ATLANTIC PLACE
City-St-Zip: AMELIA ISLAND, FL 32034

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: HAROLD CRAIG BENNETT

D

03/05/2009

Electronic Signature of Signing Officer or Director

Date