2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000076261

Entity Name: HILCY, INC.

FILED Feb 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12110 TIMBERLAKE ROAD RIVERVIEW, FL 33569 **Current Mailing Address: New Mailing Address:** 12110 TIMBERLAKE ROAD RIVERVIEW, FL 33569 FEI Number: 56-2336291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UMEH, CECILIA 12110 TIMBERLAKE ROAD RIVERVIEW, FL 33569 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition UMEH, CECILIA Name: Name: UMEH, CECILIA N 12110 TIMBERLAKE ROAD 12110 TIMBERLAKE ROAD Address: Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33569 US DP Title: DP Title: () Delete (X) Change () Addition Name: CECILIA, UMEH N Name: UMEH, CECILIA N 12110 TIMBERLAKE ROAD 12110 TIMBERLAKE ROAD Address: Address: RIVERVIEW, FL 33569 US RIVERVIEW, FL 33569 City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete DP UMEH, CECILIA N Name: Name: 12110 TIMBERLAKE ROAD Address Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569 US Title: () Delete Title: DΡ () Change (X) Addition UMEH, CECILIA N Name: Name: Address: Address: 12110 TIMBERLAKE ROAD City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569 US Title: Title: () Change (X) Addition () Delete UMEH, CECILIA N Name: Name: Address: 12110 TIMBERLAKE ROAD Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569 US Title: () Delete Title: () Change (X) Addition UMEH, CECILIA N Name: Name: 12110 TIMBERLAKE ROAD Address: Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569 US

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

SIGNATURE: CECILIA UMEH DP 02/22/2007