

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105523

Entity Name: HISSONGS, INC.

FILED
Apr 22, 2008
Secretary of State

Current Principal Place of Business:

199 NEWTON RD
THOMASVILLE, GA 31757

New Principal Place of Business:

Current Mailing Address:

199 NEWTON RD
THOMASVILLE, GA 31757

New Mailing Address:

FEI Number: 20-0604072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKERSON, M. JOSEPH
2020 W BRANDON BLVD STE 206
BRANDON, FL 33511 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PV () Delete
Name: FIELDS, RANDALL D
Address: 1813 POINTE WEST WAY
City-St-Zip: PORT ST LUCIE, FL 32966

Title: ST () Delete
Name: FIELDS, BRENDA L
Address: 1813 POINTE WEST WAY
City-St-Zip: VERO BEACH, FL 32966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV (X) Change () Addition
Name: FIELDS, RANDALL D
Address: 199 NEWTON ROAD
City-St-Zip: THOMASVILLE, GA 31757

Title: ST (X) Change () Addition
Name: FIELDS, BRENDA L
Address: 199 NEWTON ROAD
City-St-Zip: THOMASVILLE, GA 31757

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: RANDALL D. FIELDS

PV

04/22/2008

Electronic Signature of Signing Officer or Director

Date