

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116090

FILED  
Feb 15, 2011  
Secretary of State

**Entity Name:** HUBBARD AC SERVICES, INC.

**Current Principal Place of Business:**

16300 SW PALOMINO ST  
INDIANTOWN, FL 34956

**New Principal Place of Business:**

**Current Mailing Address:**

16300 SW PALOMINO ST  
INDIANTOWN, FL 34956

**New Mailing Address:**

FEI Number: 20-0543034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUBBARD, DONALD  
16300 SW PALOMINO ST  
INDIANTOWN, FL 34956 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: PD  
Name: HUBBARD, DONALD W  
Address: 16300 SW PALOMINO ST  
City-St-Zip: INDIANTOWN, FL 34956

Title: S  
Name: HUBBARD, SALLY  
Address: 16300 SW PALOMINO ST  
City-St-Zip: INDIANTOWN, FL 34956

Title: VP  
Name: HUBBARD, SALLY  
Address: 16300 SW PALOMINO ST  
City-St-Zip: INDIANTOWN, FL 34956

I hereby 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 all other like empowered.

SIGNATURE: DONALD HUBBARD

PD

02/15/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date