

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90015 019 ***150.00

DOCUMENT # P03000149535			
1. Entity Name H & P CONTRACTING, INC.			
Principal Place of Business HIGHWAY 20 EAST BRISTOL FL 32321		Mailing Address POST OFFICE BOX 704 BRISTOL FL 32321	
2. Principal Place of Business - No P.O. Box # 12720 Bird Pond Rd		3. Mailing Address P.O. Box 704	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Bristol FL		City & State Bristol FL	
Zip 32321	Country Liberty	Zip 32321	Country Liberty
6. Name and Address of Current Registered Agent HOBBY, JAMES E HIGHWAY 20 EAST BRISTOL FL 32321 <i>Address Only</i>		7. Name and Address of New Registered Agent Name James E Hobby Street Address (P.O. Box Number is Not Acceptable) 12720 Bird Pond Rd City Bristol FL Zip Code 32321	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE James E Hobby 2-1-08 (Signature, typed or printed name of registered agent and date of filing) (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May-1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOBBY, JAMES E HIGHWAY 20 EAST BRISTOL FL 32321 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	James E Hobby ☒ Change ☐ Addition 12720 Bird Pond Rd Bristol FL 32321 <i>Address Only</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARRISH, RICHARD E 10807 NW SPRING BRANCH RD BRISTOL FL 32321 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **James E Hobby** **2-1-08** **(850) 6435877**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #