2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036187

Entity Name: THE HILE TEAM, INC.

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

224 BELLA-COOLA DRIVE 1127 S. PATRICK DR

INDIAN HARBOUR BEACH, FL 32937 US SUITE 30

SATELLITE BEACH, FL 32937 US

Current Mailing Address: New Mailing Address:

224 BELLA-COOLA DRIVE 1127 S. PATRICK DR

INDIAN HARBOUR BEACH, FL 32937 US SUITE 30

SATELLITE BEACH, FL 32937 US

FEI Number: 20-0812342 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:

BOUVIER, PAUL A 3210 N. WICKHAM ROAD 5

MELBOURNE, FL 32935 US

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:

 $\label{eq:title: P,D} \mbox{Title: P,D} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title: P,D} \qquad \mbox{(X) Change () Addition}$

Name: HILE, KATHY
Address: 224 BELLA-COOLA DRIVE
Name: HILE, KATHY
Address: 432 THRUSH DRIVE

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: VP,D () Delete Title: VP,D (X) Change () Addition

 Name:
 HILE, NICHOLAS V III
 Name:
 HILE, NICHOLAS V III

 Address:
 224 BELLA-COOLA DRIVE
 Address:
 432 THRUSH DRIVE

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US City-St-Zip: SATELLITE BEACH, FL 32937 US

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: KATHY S. HILE PRES 04/22/2008