## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P04000092439

1. Entity Name

ROLLING HILLS REAL ESTATE, INC.



Principal Place of Business

924 5TH STREET CLERMONT, FL 34711 Mailing Address

924 5TH STREET CLERMONT, FL 34711

## FILED Apr 28, 2008 8:00 am Secretary of State

04-28-2008 90381 039 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

04042008 No Chg-P CR2E034 (11/05)

4. FEI Number 34-2000949

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUGHES, JOHN A 924 5TH STREET CLERMONT, FL 34711

## DO NOT WRITE IN THIS SPACE

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					
OATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		•	
TITLE NAME STREET ADORESS CITY-ST-ZIP	PVD HUGHES, JOHN A 924 5TH STREET CLERMONT, FL 34711				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under path; that I am an officer or director					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/d

Daytime Phone #