2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000063088

Entity Name: HOBSON'S HERBS & MORE, INC.

FILED Apr 30, 2008 Secretary of State

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

3888 N. LECANTO HWY 3012 W. AKRON PLACE BEVERLY HILLS, FL 34465 CITRUS SPRINGS, FL 34433

Current Mailing Address: New Mailing Address:

PO BOX 640307 BEVERLY HILLS, FL 34465

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

HOBSON, RANDALL
2507 W. OAKLAND LANE
CITRUS SPRINGS, FL 34434 US
HOBSON, RANDALL
3012 W AKRON PLACE
CITRUS SPRINGS, FL 34433 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: 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PVD () Delete
 Title:
 PVD (X) Change () Addition

 Name:
 HOBSON, JUDE
 Name:
 HOBSON, JUDE

 Address:
 2507 W. OAKLAND LANE
 Address:
 3012 W. AKRON PLACE

Address: 2507 W. OAKLAND LANE Address: 3012 W. AKRON PLACE
City-St-Zip: CITRUS SPRINGS, FL 34434 City-St-Zip: CITRUS SPRINGS, FL 34433

Title: T () Delete Title: T (X) Change () Addition Name: HOBSON, RANDALL Name: HOBSON, RANDALL

Address: 2507 W. OAKLAND LANE Address: 3012 W AKRON PLACE
City-St-Zip: CITRUS SPRINGS, FL 34434 City-St-Zip: CITRUS SPRINGS, FL 34433

Title: S () Delete Title: S (X) Change () Addition Name: PALMER-HOBSON, VERONICA H Name: PALMER-HOBSON, VERONICA H

Address: 6098 N. SPECKLED PERCH TER Address: 6 S. JACKSON ST.

City-St-Zip: HERNANDO, FL 34441 City-St-Zip: BEVERLY HILLS, FL 34465

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: JUDE HOBSON PVD 04/30/2008