

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000074086

Entity Name: JAMES E. HODGES, INC.

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

13820 ST SUGUSTINE RD SUITE 113 BOX 324
JACKSONVILLE, FL 32258

New Principal Place of Business:

5217 CHICORA CT
JACKSONVILLE, FL 32258

Current Mailing Address:

13820 ST SUGUSTINE RD SUITE 113 BOX 324
JACKSONVILLE, FL 32258

New Mailing Address:

5217 CHICORA CT
JACKSONVILLE, FL 32258

FEI Number: 20-2885446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIARBANKS, RANDAL C
76 S LAURA STREET SUITE 2110
JACKSONVILLE, FL 32202 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HODGES, JAMES E PRES
Address: 13820 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HODGES, JAMES E PRES
Address: 5217 CHICORA CT
City-St-Zip: JACKSONVILLE, FL 32258

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: JAMES E HODGES

PRES

01/20/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date