2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # P05000115415 1. Entity Name 04-23-2007 90129 001 ***300.00 THRILL HILL, INC. Principal Place of Business Mailing Address 66010347 2231 CR 44 W 2231 CR 44 W EUSTIS, FL 32726 EUSTIS, FL 32726 01182007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3332346 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BROWN, THOMAS H DO NOT WRITE 2231 CR 44 W EUSTIS, FL 32726 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. DATE STATE OF THE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees (11/95) 10. OFFICERS AND DIRECTORS 1 2 2 2 3 TITLE D BROWN, THOMAS H NAME ≥ 75 Admilionar c Requirem 2231 CR 44 W STREET ADDRESS CiTY-ST-ZIP EUSTIS, FL 32726 TITLE BROWN, JERRYS P NAME 2231 CR 44 W STREET ADDRESS CITY-ST-ZIP EUSTIS, FL 32726 TITLE NAME STREET ADDRESS DO NOT WRITE Wills and touch CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP J. 657 13 156. 5 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 oath; that I am an officer or director of the corporation or the receiver of 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.

ND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

FILED