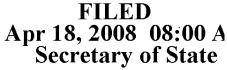
2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P05000149416 HCB FINANCIAL CORP. Mailing Address Principal Place of Business % PHILLIPS PROPERTIES INC 1217 AIRPORT RD UNIT 419 % PHILLIPS PROPERTIES INC 1217 AIRPORT RD UNIT 419



| DESTIN, FL 32541 | | DESTIN, FL 32541 | | | | | | |
|--|---|--------------------------------------|----------------|-------------------------------------|-------------------------|------------------|---|--|
| DO NOT WRITE IN THIS SPAC | | | | 03262008 4. FE' Number 20-383 | No Chg-P | CR2E03 | Applied For Not Applicable \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | | | | | | |
| PHILLIPS, RUPERT C/O PHILLIPS PROPERTIES INC 1217 AIRPORT RD UNIT 419 DESTIN, FL 32541 | | | | DO NOT WRITE IN THIS SPACE | | | | |
| the obligati | named entity submits this statement for it ions of registered agent. | ne púrpose of changing its registere | d office or re | egistered agent, or bo | th, in the State of Flo | orida Tam (| amiliar with, and accept | |
| SIGNATURE | | | | required when reinstating) | | DATE | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution | | | cing | \$5.00 May Be Added to Fees | | | | |
| 10. OFFICERS AND DIRECTORS | | | | ·· | | | | |
| TITLE TRAME STREET ADDRESS CITY STEZIP TITLE TRAME | PTSD PHILLIPS, RUPERT E 1217 AIRPORT RD UNIT 419 DESTIN, FL 32541 | | | | U00000 |) <u>905</u> 062 | -021 150.00 | |
| STRLET ADDRESS COY-ST-ZIP | | | | | 09/01/08- | -60035- | -UZI 150.00 | |
| HILL NAME SINGEL ADDRESS CHY ST-ZIP | | | DO NOT WRITE | | | | | |
| DILE NAME CHREET ADDRESS ONY ST-ZIP | | , | | IN ' | THIS SF | PACE | | |
| THUE DAME TORFET RODINESS CHY ST ZIP | | | | | | | | |
| THEET ADDRESS CHY-SI-ZO | | | | | | | | |

12. Thereby 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 thu receiver of it is separation or thu receiver of it is separation or the receiver of its separation of the corporation or the receiver of its separation of the corporation of the receiver of its separation of the receiver of it

SIGNATURE:

850-650-520