2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 27, 2008 08:00 Al Secretary of State **DOCUMENT # P06000041882** 1. Entity Name CHARLES HILGERS INC. Principal Place of Business Mailing Address 1401 FIFER LANE 1401 FIFER LANE SPRING HILL, FL 34609 SPRING HILL, FL 34609 CR2E034 (11/05) 01042008 No Chg-P Applied For 4, FEi Number 20-4552666 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HILGERS, CHARLES DO NOT WRITE 1401 FIFER LANE SPRING HILL, FL 34609 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS P.VP ΠLE HILGERS, CHARLES NAME STREET ADDRESS 1401 FIFER LANE SPRING HILL, FL 34609 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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

3-25-2008

Daytime Phone #

changed, or on an attachment with an address, with all other like empowered.

BHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED