

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000065354

FILED
Apr 23, 2008
Secretary of State

Entity Name: CHRISTOPHER SCOTT HOPKINS INC.

Current Principal Place of Business:

1112 ERROL PARKWAY
APOPKA, FL 32712

New Principal Place of Business:

1765 9 MILE ROAD
SUITE 1 #332
PENSACOLA, FL 32514

Current Mailing Address:

1112 ERROL PARKWAY
APOPKA, FL 32712

New Mailing Address:

1765 9 MILE ROAD
SUITE 1 #332
PENSACOLA, FL 32514

FEI Number: 56-2583794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPKINS, CHRISTOPHER S
1112 ERROL PARKWAY
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

HOPKINS, CHRISTOPHER S
1765 9 MILE ROAD
SUITE 1 #332
PENSACOLA, FL 32514 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:

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOPKINS, CHRISTOPHER S
Address: 1112 ERROL PARKWAY
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOPKINS, CHRISTOPHER S
Address: 1765 9 MILE ROAD SUITE 1 #332
City-St-Zip: PENSACOLA, FL 32514

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: CHRISTOPHER S HOPKINS

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date