## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000092800

Entity Name: 2 HIBBS & A BUCKET INC.

FILED Apr 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9780 CREEKFRONT RD 4027 SHASTA DRIVE

APT. # 501 JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32256 US

Current Mailing Address: New Mailing Address:

9780 CREEKFRONT RD 4027 SHASTA DRIVE

APT. # 501 JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32256 US

FEI Number: 56-2608039 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HIBBLER, BRANDY J SMEDLEY, BONNIE L
9780 CREEKFRONT ROAD 6332 ANVIL ROAD
APT. #501 JACKSONVILLE, FL 32277 US

APT. #501 JACKSONVILLE, FL 32277 U
JACKSONVILLE, FL 32256 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: BONNIE L. SMEDLEY 04/15/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: HIBBLER, BRANDY J Name: HIBBLER, DARLENE J
Address: 9780 CREEKFRONT ROAD Address: 4027 SHASTA DRIVE

City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32207 US

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HIBBLER, DARLENE J
 Name:

 Address:
 9780 CREEKFRONT ROAD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32256 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DARLENE J HIBBLER P 04/15/2007