2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093276

Entity Name: CHAD HICKMAN, INC.

FILED Jul 31, 2009 Secretary of State

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

10500 MARION ST. 7232 4TH AVE S

ENGLEWOOD, FL 34224 US SAINT PETERSBURG, FL 33707 US

Current Mailing Address: New Mailing Address:

10500 MARION ST. 7232 4TH AVE S

SAINT PETERSBURG, FL 33707 ENGLEWOOD, FL 34224 US US

FEI Number: 26-0754580 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HICKMAN, CHAD HICKMAN, CHAD 10500 MARION ST 7232 4TH AVE S

ENGLEWOOD, FL 34224 US SAINT PETERSBURG, FL 33707 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: CHAD HICKMAN 07/31/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

PVST

Title:

Title: **PVST** (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete HICKMAN, CHAD Name: Name: HICKMAN, CHAD 10500 MARION ST. 7232 4TH AVE S Address: Address:

City-St-Zip: ENGLEWOOD, FL 34224 US City-St-Zip: SAINT PETERSBURG, FL 33707 US

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

Name: HICKMAN, CHAD Name: HICKMAN, CHAD 10500 MARION ST. Address: 7232 4TH AVE S Address:

ENGLEWOOD, FL 34224 US SAINT PETERSBURG, FL 33707 US City-St-Zip: City-St-Zip:

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: CHAD HICKMAN **PRES** 07/31/2009