

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15701

Entity Name: H.B. PAULK GROCERY CO., INC.

FILED  
Feb 22, 2006  
Secretary of State

## Current Principal Place of Business:

HWY 52  
OPP, AL 36467

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 637  
OPP, AL 36467 US

## New Mailing Address:

FEI Number: 63-0160937

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUKE, STANLEY K.  
121 COURTHOUSE TERR  
CRESTVIEW, FL 32536 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: YOUMANS, FERRIS PAUL, K  
Address: OLD PERRY STORE ROAD  
City-St-Zip: OPP, AL 36467

Title: STD ( ) Delete  
Name: ANDERSON, RENEE Y.,  
Address: 4952 VETERANS MEMORIAL PARKWAY  
City-St-Zip: OPP, AL 36467

Title: VD ( ) Delete  
Name: MURPHY, MARU Y.,  
Address: 411 HWY 52  
City-St-Zip: OPP, AL 36467

Title: VD ( ) Delete  
Name: ANDERSON, LARRY W.,  
Address: 4952 VETERANS MEMORIAL PARKWAY  
City-St-Zip: OPP, AL 36467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: FERRIS P. YOUMANS

PD

02/22/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date