

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P93000046222

**FILED**  
**Nov 18, 2008**  
**Secretary of State****Entity Name:** HCF GROUP, INC.**Current Principal Place of Business:**801 BRICKELL AVE  
SUITE 900 C/O JERRY D. BAILEY  
MIAMI, FL 33131**New Principal Place of Business:**1651 MICANOPY AVE  
C/O JERRY D. BAILEY  
MIAMI, FL 33133**Current Mailing Address:**13950 SW 100TH AVE.  
MIAMI, FL 33176**New Mailing Address:****FEI Number:** 65-0440109**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CALIN, PETER J  
13950 S.W. 100TH AVE.  
MIAMI, FL 33176 US**Name and Address of New Registered Agent:**B.S.P.A.  
200 SOUTH BISCAYNE BLVD  
1000  
MIAMI, FL 33131 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: B.S.P.A.

11/18/2008

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CALIN, PETER  
Address: 13950 SW 100 AVE  
City-St-Zip: MIAMI, FL 33176

Title: SGCD ( ) Delete  
Name: BAILEY, JERRY  
Address: 1651 MICANOPY  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: FORD, EUGENE  
Address: 8161 SHADY GROVE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete  
Name: HOLLOWAY, MARVIN  
Address: 600 CORAL WAY UNIT 1  
City-St-Zip: CORAL GABLES, FL 33134

**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 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: JERRY BAILEY

SCG

11/18/2008

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