

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000051311

Entity Name: H & H RESIDUAL SERVICES, INC.

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

6990 US HWY 27
BRANFORD, FL 32008

New Principal Place of Business:

Current Mailing Address:

PO BOX 390
BRANFORD, FL 32008

New Mailing Address:

FEI Number: 59-3397124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HACHT, NANCY
6990 US HWY 27
BOX 390
BRANFORD, FL 32008 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: HACHT, STEPHEN
Address: 5116 SW CR 18
City-St-Zip: FORT WHITE, FL 32038

Title: D () Delete
Name: HACHT, NANCY
Address: PO BOX 390
City-St-Zip: BRANFORD, FL 32008

Title: TD () Delete
Name: HACHT, RICK
Address: PO BOX 390
City-St-Zip: BRANFORD, FL 32008

Title: VP/S () Delete
Name: MATTHEWS, KATIE H
Address: 178 SW WALTON GLN
City-St-Zip: FORT WHITE, FL 32038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HACHT, STEPHEN
Address: PO BOX 390
City-St-Zip: BRANFORD, FL 32008

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: KATIE MATTHEWS

S

04/23/2008

Electronic Signature of Signing Officer or Director

Date