2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000003191

Name:

Address:

City-St-Zip:

MORGAN, WILLIAM R

4110 BENT TREE CIRCLE

PONTE VEDRA BEACH, FL 32082

Entity Name: HYDROCARBON PRODUCTS COMPANY, INC.

FILED Apr 26, 2009 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:		
	SIDE CIRCLE EDRA BEACH	, FL 32082	149 LINKSIDE CI PONTE VEDRA I	RCLE BEACH, FL 32082	US	
Current Mailing Address:			New Mailing Ad	New Mailing Address:		
	SIDE CIRCLE EDRA BEACH	, FL 32082	149 LINKSIDE CI PONTE VEDRA I	RCLE BEACH, FL 32082	US	
FEI Number	: 13-0864950	FEI Number Applied For ()	FEI Number Not Applicable () Certificate o	f Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Addre	Name and Address of New Registered Agent:		
PONTE VI	SIDE CIRCLE EDRA BEACH	, FL 32082 US submits this statement for the	purpose of changing its regi	stered office or regis	stered agent, or both,	
SIGNATUI						
		nic Signature of Registered Ag	ent	Date		
Election Ca	mpaign Financin	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITIONS/CH/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MORGAN, GRE 149 LINKSIDE		Title: Name: Address: City-St-Zip:	()Change ()A	ddition	
Title: Name: Address: City-St-Zip:	MORGAN, KAF 149 LINKSIDE		Title: Name: Address: City-St-Zip:	()Change ()A	ddition	
Title:	VP () Delete	Title:	() Change () A	ddition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GREG MORGAN P 04/26/2009