

2005 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Jan 27, 2005
Secretary of State**

DOCUMENT# P99000080802

Entity Name: HUB CITY DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

550 W. REDSTONE AVE
STE. 470
CRESTVIEW, FL 32536 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 758
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 59-3679206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, TIMOTHY M
6061 W. DOGWOOD DR.
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: TIMOTHY M. CLARK

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:

Title: DVP () Delete
Name: BANKERT, GLENN M
Address: 550 W. REDSTONE AVE, #470
City-St-Zip: CRESTVIEW, FL 32536 US

Title: PD () Delete
Name: CLARK, TIMOTHY M
Address: 6061 W DOGWOOD DR
City-St-Zip: CRESTVIEW, FL 32536

Title: SD () Delete
Name: THIGPEN, LEE
Address: 550 W. REDSTONE AVE
City-St-Zip: CRESTVIEW, FL 32536 US

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY M. CLARK

Electronic Signature of Signing Officer or Director

PD

01/27/2005

Date