

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90346 034 ***158.75

DOCUMENT # S26427 1. Entity Name HIBACO HOLDINGS, INC.					
Principal Place of Business 155 INTERNATIONAL GOLF PKWY ST. AUGUSTINE, FL 32095 US			Mailing Address 155 INTERNATIONAL GOLF PKWY ST. AUGUSTINE, FL 32095 US		
2. Principal Place of Business		3. Mailing Address 2922 AMELLIA DRIVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State JACKSONVILLE, FL		4. FEI Number 59-3043572	
Zip		Zip 32257		Country USA	
6. Name and Address of Current Registered Agent TOLSON, JOHN F JR. 462 KINGSLEY AVE., STE. 101 ORANGE PARK, FL 32073				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE VP NAME BARNARD, MIKE STREET ADDRESS 3820 WEST GLENDALE CT. CITY-ST-ZIP JACKSONVILLE, FL 32259	☐ Delete		TITLE VD NAME BARNARD, MICHAEL S. STREET ADDRESS 3820 WEST GLENDALE CT. CITY-ST-ZIP JACKSONVILLE, FL 32259	☒ Change ☐ Addition	
TITLE TD NAME HILLHOUSE, TERRY STREET ADDRESS 2922 AMELLIA DRIVE CITY-ST-ZIP JACKSONVILLE, FL 32257	☐ Delete		TITLE TD NAME HILLHOUSE, M. TERRY STREET ADDRESS 2922 AMELLIA DRIVE CITY-ST-ZIP JACKSONVILLE, FL 32257	☒ Change ☐ Addition	
TITLE P NAME COPELAND, WARNER STREET ADDRESS 100 BRACKEN COURT CITY-ST-ZIP JACKSONVILLE, FL 32259	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE CEOD NAME COPELAND, DONALD J STREET ADDRESS 2889 SOUTH PONTE VERDA BEACH CITY-ST-ZIP PONTE VERDA BEACH, FL 32089	☐ Delete		TITLE PD NAME COPELAND, DONALD J. STREET ADDRESS 2889 SOUTH PONTE VERDA BLVD. CITY-ST-ZIP PONTE VERDA BEACH, FL 32089	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: M. Terry Hillhouse M.TERRY HILLHOUSE 03-21-06 904-636-5222 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					