2007 FOR PROFIT CORPORATION . **ANNUAL REPORT**

Secretary of State DOCUMENT #F01000000070 02-07-2007 90051 047 ***150.00 JACK L. HAYES INTERNATIONAL, INC. Principal Place of Business Mailing Address 40011110 **4028 WILLIAMS STREET** 4028 WILLIAMS STREET FRUITLAND PARK, FL 34731 FRUITLAND PARK, FL 34731 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 14-1661235 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 10rk B. Doyle & HAYES, JACK L Street Address (P.O. Box Number is Not Acceptable) **4028 WILLIAMS STREET** FRUITLAND PARK, FL 34731 utilliams Fruitland Park 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 Cathu A. Doyle NOTE: Registered Agent si \$5.00 May Be Added to Fees 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CD TITLE Delete TITLE Change : Doyle, Mark R. HAYES, JACK L NAME NAME 4028 Williams Street Fruitland Park, FL 34731 STREET ADDRESS 5920 SPINNAKER LOOP STREET ADDRESS CITY-ST-ZIP LADY LAKE, FL CITY-ST-7IP Delete TITLE Change TITLE Addition Doyle, costry A. NAME HAYES, DARLENE G STREET ADDRESS 5920 SPINNAKER LOOP STREET ADDRESS 4028 Williams Street CITY-ST-ZIP LADY LAKE, FL 34731 CITY-ST-ZIF Fruitland Park, Fl TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST. 7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

FILED

Feb 07, 2007 8:00 am

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