

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000055899

**Entity Name:** U.S. HAY, INC.

**Current Principal Place of Business:**

13600 S HWY 475  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

13600 S HWY 475  
SUMMERFIELD, FL 34491 US

**FEI Number: 59-3453504**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HIATT, RONALD E  
12484 SW 140TH LOOP  
DUNNELLON, FL 34432 US

*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

**Officer/Director Detail :**

Title D  
Name HIATT, RONALD E  
Address 12484 SW 140TH LOOP  
City-State-Zip: DUNNELLON FL 34432

Title D  
Name HIATT, JUDITH C  
Address 12484 SW 140TH LOOP  
City-State-Zip: DUNNELLON FL 34432

Title OFFICER  
Name LAWSON, CHRISTINA JOY  
Address 1200 SE 82ND STREET ROAD  
City-State-Zip: OCALA FL 34480

Title OFFICER  
Name LAWSON, JASON COLIN  
Address 1200 SE 82ND STREET ROAD  
City-State-Zip: OCALA FL 34480

Title OFFICER  
Name HIATT, AARON MITCHEL  
Address 5801 WEST ANOTHONY ROAD  
City-State-Zip: OCALA FL 34479

*I hereby 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 all other like empowered.*

**SIGNATURE: CHRISTINA LAWSON**

**OFFICER**

**06/27/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date