

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 21, 1999 8:00 am  
Secretary of State

04-21-1999 90125 022 \*\*\*150.00

DOCUMENT # 269355

1. Corporation Name

THE HAMMET COMPANY, INC.

Principal Place of Business

1025 JEFFERSON STE 1  
P.O. BOX 992  
PADUCAH KY 42002-0992

Mailing Address

1025 JEFFERSON STE 1  
P.O. BOX 992  
PADUCAH KY 42002-0992

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/26/1963

4. FEI Number

59-1003217

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

SMITH, CRIT  
FOURTH FLOOR  
3520 THOMASVILLE RD  
TALLAHASSEE FL 32308

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SD ☐ DELETE

NAME HAMMET, PATRICK  
STREET ADDRESS 1025 JEFFERSON, STE 1  
CITY-ST-ZIP PADUCAH KY

TITLE D ☐ DELETE

NAME HAMMET, LOIS N  
STREET ADDRESS 1025 JEFFERSON STE 1  
CITY-ST-ZIP PADUCAH KY

TITLE PD ☐ DELETE

NAME HAMMET, L B  
STREET ADDRESS 1025 JEFFERSON STE 1  
CITY-ST-ZIP PADUCAH KY

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SD ☒ Change ☐ Addition

1.2 NAME HAMMET, PATRICK  
1.3 STREET ADDRESS 333 BROADWAY, SUITE 815  
1.4 CITY-ST-ZIP PADUCAH KY 42001

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME HAMMET, LOIS N  
2.3 STREET ADDRESS 333 BROADWAY, SUITE 815  
2.4 CITY-ST-ZIP PADUCAH KY 42001

3.1 TITLE PD ☒ Change ☐ Addition

3.2 NAME HAMMET, L B  
3.3 STREET ADDRESS 333 BROADWAY, SUITE 815  
3.4 CITY-ST-ZIP PADUCAH KY 42001

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99

Date

502-444-7241

Daytime Phone #

CR2E034 (11/98)