2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 299266

FILED Apr 21, 2006 Secretary of State

Entity Name: HITCHCOCK & SONS, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
105 N MAI PO BOX 1 ALACHUA		US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
105 N MAI PO BOX 1 ALACHUA		US			
FEI Number:	59-1108770	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
105 N MAI	CK, ROBERT N STREET				
ALACHUA	, FL 32615	US			
The above			purpose of changing its registere	ed office or registered agent, or both,	
The above	named entity e of Florida. RE:	submits this statement for the		ed office or registered agent, or both,	
The above in the State	named entity e of Florida. RE:			ed office or registered agent, or both, Date	
The above in the State SIGNATUF	named entity of Florida. RE: Electro	submits this statement for the			
The above in the State SIGNATUR	named entity of Florida. RE: Electro	submits this statement for the noic Signature of Registered Agong Trust Fund Contribution ().	ent		
The above in the State SIGNATUR	named entity e of Florida. RE: Electro npaign Financia S AND DIRECTOR PRES (r submits this statement for the prince Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete ROBERT ALAN TREET	ent	Date	
The above in the State SIGNATUF Election Car OFFICER: Title: Name: Address:	named entity of Florida. RE: Electro mpaign Financii S AND DIREC PRES (HITCHCOCK, 105 N MAIN S ALACHUA, FL	e submits this statement for the conic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete ROBERT ALAN TREET 00000,) Delete ROBERT	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CLARA J. BEMBRY ST 04/21/2006