

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 300012

1. Entity Name
ROBERT C. HATTON, INC.



Principal Place of Business
135 BACON POINT ROAD
PAHOKEE, FL 33476

Mailing Address
P.O. BOX 220
PAHOKEE, FL 33476

FILED
06 MAY 10 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1116726

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HATTON, ROGER C.
2727 BACOM POINT ROAD
PAHOKEE, FL 33476

**DO NOT WRITE
IN THIS SPACE**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
HATTON, ROGER C
2727 BACON POINT RD
PAHOKEE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
ALLEN, PAUL
13348 HWY 441 N
CANAL POINT, FL 33438

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TS 5/16/06

100074782081
05/18/06--01005--003 **250.00

**DO NOT WRITE
IN THIS SPACE**

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 the 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 another fee empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/06

Date

Daytime Phone #

See 924-2455