

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
CORPORATION & ASSURANCE

DOCUMENT # 319146

(7)

HAYCO INDUSTRIES, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/24/1967	3a. Date of Last Report 07/06/1994
4. FID Number 38-1871057	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 has liability for intangible tax under § 192.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 3420 N.E. SUGARHILL AVE. JENSEN BEACH FL 34957	2a. Mailing Address 3420 N.E. SUGARHILL AVE. JENSEN BEACH FL 34957
21. State, Apt. # or P.O. # FL	26. State, Apt. # or P.O. # FL
22. City & State JENSEN BEACH FL	27. City & State JENSEN BEACH FL
23. Zip 34957	28. Zip 34957
24. County ST. JOHNS	30. County ST. JOHNS

9. Name and Address of Current Registered Agent CARPENTER, CHARLES V 3420 NE SUGARHILL AVE JENSEN BEACH FL 34957	10. Name and Address of New Registered Agent <table border="1"> <tr> <td>01. Name</td> <td></td> </tr> <tr> <td>02. Street Address (P.O. Box Number is Not Acceptable)</td> <td></td> </tr> <tr> <td>03. City</td> <td></td> </tr> <tr> <td>04. State</td> <td>FL</td> </tr> <tr> <td>05. Zip Code</td> <td></td> </tr> </table>	01. Name		02. Street Address (P.O. Box Number is Not Acceptable)		03. City		04. State	FL	05. Zip Code	
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02. Street Address (P.O. Box Number is Not Acceptable)											
03. City											
04. State	FL										
05. Zip Code											

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 of Registered Agent (must be signed by Registered Agent)

Signature of Registered Agent (must be signed by Registered Agent)

Signature of Registered Agent (must be signed by Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	PD HAYDEN, DONALD C 3420 NE SUGARHILL AVE JENSEN BEACH FL	1. TITLE	☐ Change ☐ Addition
STREET ADDRESS		2. NAME	
CITY, ST, ZIP		3. STREET ADDRESS	
NAME	ATAS MACK, MILTON L 35005 MICHIGAN AVE W 490 WAYNE MI	4. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		5. NAME	
CITY, ST, ZIP		6. STREET ADDRESS	
NAME	VT CARPENTER, CHARLES V 3420 NE SUGARHILL AVE JENSEN BCH FL	7. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		8. NAME	
CITY, ST, ZIP		9. STREET ADDRESS	
NAME	S BARRIE, R. H. 3420 NE SUGARHILL AVE JENSEN BCH FL	10. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		11. NAME	
CITY, ST, ZIP		12. STREET ADDRESS	
NAME		13. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		14. NAME	
CITY, ST, ZIP		15. STREET ADDRESS	
NAME		16. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		17. NAME	
CITY, ST, ZIP		18. STREET ADDRESS	
NAME		19. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		20. NAME	
CITY, ST, ZIP		21. STREET ADDRESS	
NAME		22. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		23. NAME	
CITY, ST, ZIP		24. STREET ADDRESS	
NAME		25. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		26. NAME	
CITY, ST, ZIP		27. STREET ADDRESS	
NAME		28. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		29. NAME	
CITY, ST, ZIP		30. STREET ADDRESS	
NAME		31. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		32. NAME	
CITY, ST, ZIP		33. STREET ADDRESS	
NAME		34. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		35. NAME	
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NAME		43. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		44. NAME	
CITY, ST, ZIP		45. STREET ADDRESS	
NAME		46. CITY, ST, ZIP	☐ Change ☐ Addition
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STREET ADDRESS		50. NAME	
CITY, ST, ZIP		51. STREET ADDRESS	
NAME		52. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		53. NAME	
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NAME		82. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		83. NAME	
CITY, ST, ZIP		84. STREET ADDRESS	
NAME		85. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		86. NAME	
CITY, ST, ZIP		87. STREET ADDRESS	
NAME		88. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		89. NAME	
CITY, ST, ZIP		90. STREET ADDRESS	
NAME		91. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		92. NAME	
CITY, ST, ZIP		93. STREET ADDRESS	
NAME		94. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		95. NAME	
CITY, ST, ZIP		96. STREET ADDRESS	
NAME		97. CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		98. NAME	
CITY, ST, ZIP		99. STREET ADDRESS	
NAME		100. CITY, ST, ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information submitted herein is voluntarily furnished and does not qualify for the exemption stated in Section 191.03(1)(b), Florida Statutes. I further certify that the information submitted herein is the annual report of a corporation, partnership, or other entity, and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation, or the member or partner empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears on the list of those entitled to sign the report as an attachment with an address.

SIGNATURE: *Charles V. Carpenter*
Charles V. Carpenter, Vice-President

4/25/95 (407) 334-6600