FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **391669** **(9)**

1. Corporate Name
WILLIAM S. HAMMOND, INC.

Principal Address
606 W MAIN ST
LEESBURG FL 34748-2186
5196

Mailing Address
606 W MAIN ST
LEESBURG FL 34748-2186
5196

3. Date Incorporated or Qualified: **11/19/1971**

3a. Date of Last Report: **01/13/1995**

4. FEI Number: **59-1369852**

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. Did corporation file Equity Securities under 1934 Act Florida Statutes? [ ] Yes [✓] No

2. Principal Place of Business
21
22
23
24 25

2a. Mailing Address
26
27
28
29 30

9. Name and Address of Current Registered Agent

HAMMOND, WILLIAM S
606 W MAIN ST
LEESBURG FL 24748
34748 5196

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Not Acceptable)
83
84 City
FL 85 Zip Code

11. [illegible] the statement for the purpose of continuing registered office [illegible] the corporation's board of directors hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Florida Statutes.

12. OFFICERS AND DIRECTORS

PD [ ] Delete
HAMMOND, WILLIAM S
34545 HAMMOND LANE
EUSTIS, FL 00000

D [ ] Delete
HAMMOND, PHILLIP A.
34531 HAMMOND LANE
EUSTIS FL

SD [ ] Delete
HAMMOND, W. ERIC
605 ROSS ST.
LEESBURG FL

[ ] Delete
[ ] Delete
[ ] Delete
[ ] Delete

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[✓] Change [ ] Add
32136
[✓] Change [ ] Add
32136
[✓] Change [ ] Add
34748
[ ] Change [ ] Add
[ ] Change [ ] Add
[ ] Change [ ] Add

14. [illegible] Section 119.07(3)(i), Florida Statutes. Further [illegible] 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 a receiver or trustee or other fiduciary lawfully authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears above, or on attachments hereto, is true and accurate.

SIGNATURE: William S. Hammond
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-2346 1-352-787-6000

CR2E034 (12/95)