

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 474094

1. Entity Name
HEDRON CONSTRUCTION COMPANY, INC.



Principal Place of Business
**303 OAK HILL DRIVE
ALTAMONTE SPGS, FL 32701**

Mailing Address
**303 OAK HILL DRIVE
ALTAMONTE SPGS, FL 32701**

FILED
Feb 03, 2005 08:00 AM
Secretary of State



01242005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1615032

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HARDESTY, LAWRENCE E
303 OAK HILL DR
ALTAMONTE SPRINGS, FL 32701**

**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 (applicable) (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HARDESTY, LAWRENCE E.
STREET ADDRESS	303 OAK HILL DRIVE
CITY - ST - ZIP	ALTAMONTE SPGS, FL
TITLE	S
NAME	HARDESTY, SHARON R.
STREET ADDRESS	303 OAK HILL DRIVE
CITY - ST - ZIP	ALTAMONTE SPGS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000212141
02/03/05-80018-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 this 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 all other like empowered.

SIGNATURE: *Lawrence E. Hardesty*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/05 **407-830-8884**
Date Daytime Phone

LAWRENCE E. HARDESTY