

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 579299

FILED
Jan 11, 2009
Secretary of State

Entity Name: HAMMER CONSTRUCTION OF JAX, INC.

Current Principal Place of Business:

1444 REWIS ROAD WEST
P. O. BOX 7864
JACKSONVILLE, FL 322380864

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 7864
JACKSONVILLE, FL 322380864

New Mailing Address:

FEI Number: 59-1878191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMNER, JESSE VERNON
1444 REVIS ROAD WEST
JACKSONVILLE, FL 32220 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAMNER, JESSE VERNON,
Address: 1444 REWIS ROAD WEST
City-St-Zip: JACKSONVILLE, FL 00000,

Title: D () Delete
Name: SCHMACHER, STEVE,
Address: 11934 PINEBROOK DR. S.
City-St-Zip: JACKSONVILLE, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JESSE VERNON HAMNER

PRES

01/11/2009

Electronic Signature of Signing Officer or Director

Date