

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90400 040 ***150.00

DOCUMENT # 625854

1. Entity Name
SUWANNEE LIME COMPANY



Principal Place of Business

**U S HWY 27 EAST
BRANFORD, FL 32008**

Mailing Address

**P.O. BOX 238
BRANFORD, FL 32008 US**

50039061



04122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1916078

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HATCH, RUDOLPH
REYNOLDS STREET
BRANFORD, FL 32008**

**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, 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	PD
NAME	HATCH, LEON D
STREET ADDRESS	6519 HWY 27 S
CITY - ST - ZIP	BRANFORD, FL 32008
TITLE	VD
NAME	HATCH, CHARLES E
STREET ADDRESS	HWY 247 BOX 184
CITY - ST - ZIP	BRANFORD, FL 32008
TITLE	STD
NAME	HATCH, A. RUDOLPH
STREET ADDRESS	O'BRIEN ST BOX 238
CITY - ST - ZIP	BRANFORD, FL 32008
TITLE	D
NAME	HATCH, LEON D
STREET ADDRESS	JENKINS ST
CITY - ST - ZIP	BRANFORD, FL 32008
TITLE	D
NAME	HATCH, A. RUDOLPH
STREET ADDRESS	REYNOLDS ST BOX 238
CITY - ST - ZIP	BRANFORD, FL 32008
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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)(i), 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:

W. Randolph Hatch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

W. Randolph Hatch *4-13-05* *(386) 935-1419*