

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90190 048 ***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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01292006 Chg-P CR2E034 (11/05)

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

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006 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 ☐ Delete

TITLE VD
NAME HATCH, CHARLES E
STREET ADDRESS HWY 247 BOX 184
CITY-ST-ZIP BRANFORD, FL 32008 ☐ Delete

TITLE STD
NAME HATCH, W. RANDOLPH
STREET ADDRESS PO BOX 456 HWY 27
CITY-ST-ZIP BRANFORD, FL 32008 ☐ Delete

TITLE D
NAME HATCH, LEON D
STREET ADDRESS JENKINS ST
CITY-ST-ZIP BRANFORD, FL 32008 ☐ Delete

TITLE D
NAME HATCH, A. RUDOLPH
STREET ADDRESS REYNOLDS ST BOX 238
CITY-ST-ZIP BRANFORD, FL 32008 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD HATCH, LEON D.J.F. ☐ Change ☒ Addition
NAME
STREET ADDRESS SAME
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP

TITLE D HATCH, LEON D. SR. ☒ Change ☐ Addition
NAME 26659 Hwy 247 E P.O. Box 295
STREET ADDRESS BRANFORD, FL 32008
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Charles E. Hatch **Charles E. HATCH**

1-30-06

386-935-1425

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #