

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 625854

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: SUWANNEE LIME COMPANY

## Current Principal Place of Business:

U S HWY 27 EAST  
BRANFORD, FL 32008

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 238  
BRANFORD, FL 32008 US

## New Mailing Address:

FEI Number: 59-1916078      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HATCH, RUDOLPH  
REYNOLDS STREET  
BRANFORD, FL 32008 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: PD ( ) Delete  
Name: HATCH, LEON D JR  
Address: 6519 HWY 27 S  
City-St-Zip: BRANFORD, FL 32008

Title: VD ( ) Delete  
Name: HATCH, CHARLES E  
Address: HWY 247 BOX 184  
City-St-Zip: BRANFORD, FL 32008

Title: STD ( ) Delete  
Name: HATCH, W. RANDOLPH  
Address: PO BOX 456 HWY 27  
City-St-Zip: BRANFORD, FL 32008

Title: D ( ) Delete  
Name: HATCH, LEON D SR  
Address: 26659 HWY 27 E/P.O. BOX 295  
City-St-Zip: BRANFORD, FL 32008

Title: D ( ) Delete  
Name: HATCH, A. RUDOLPH  
Address: REYNOLDS ST BOX 238  
City-St-Zip: BRANFORD, FL 32008

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LEON D. HATCH, JR.

PD

01/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date