

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 12, 2007 08:00 AM
Secretary of State

DOCUMENT # 626197

1. Entity Name

BRANFORD SALES, INC.



Principal Place of Business

U.S. HIGHWAY 27 EAST, BOX 238
BRANFORD FL 32008

Mailing Address

U.S. HIGHWAY 27 EAST, BOX 238
BRANFORD FL 32008



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number **59-1934270**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

HATCH, LEON D.
U.S. HIGHWAY 27 EAST, BOX 238
BRANFORD FL 32008

7. Name and Address of New Registered Agent

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, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	HATCH, LEON D JR.	
STREET ADDRESS	6519 US 27 S	
CITY- ST- ZIP	BRANFORD FL 32008	
TITLE	D	<input type="checkbox"/> Delete
NAME	HATCH, RUDOLPH	
STREET ADDRESS	REYNOLDS ST P O BOX 238 N/A	
CITY- ST- ZIP	BRANFORD FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HATCH, LEON D SR.	
STREET ADDRESS	26659 HWY 247 EAST PO BOX 295	
CITY- ST- ZIP	BRANFORD FL 32008	
TITLE	D	<input type="checkbox"/> Delete
NAME	HATCH, CHARLES E	
STREET ADDRESS	PO BOX 184, HWY 247 N/A	
CITY- ST- ZIP	BRANFORD FL 32008	
TITLE	D	<input type="checkbox"/> Delete
NAME	HATCH, WALTER R	
STREET ADDRESS	HWY 129, P O BOX 238 N/A	
CITY- ST- ZIP	BRANFORD FL 32008	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HATCH, LEON D JR	
STREET ADDRESS	6519 US 275 PO BOX 314	
CITY- ST- ZIP	BRANFORD FL 32008	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	U000000702046
STREET ADDRESS	04/20/07-80084-005 150.00
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Leon D. Hatch Jr.* *Leon D. Hatch Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/12/07 *(386)935-1419*