

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 01, 2006 08:00 AM
Secretary of State

DOCUMENT # F00000003710	
1. Entity Name HINKLE METALS & SUPPLY CO., INC.	

Principal Place of Business P.O. BOX 11441 BIRMINGHAM, AL 35202	Mailing Address P.O. BOX 11441 BIRMINGHAM, AL 35202
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02152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-0791996	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent VICKERS, SHAWN 490 HEINBERG ST PENSACOLA, FL 32505
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**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

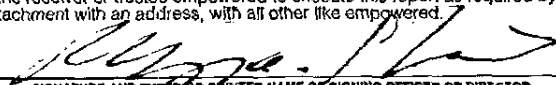
9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP HINKLE, F. HUNTER JR. 1416 ST. JAMES CT. BIRMINGHAM, AL 35243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCV HINKLE, PHILLIP E 5124 CLUBBRIDGE DR. BIRMINGHAM, AL 35242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CAIN, STEPHEN L 4208 STONE RIVER CIRCLE BIRMINGHAM, AL 35213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SIEGELMAN, LESLIE B 3377 OVERBROOK RD. BIRMINGHAM, AL 35213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/10/06-80034-017 150.00

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IN THIS SPACE**

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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/06 205-376-3300
Date Daytime Phone