

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90039 035 ***150.00

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02122007 No Chg-P CR2E034 (11/05)

4. FEI Number	Applied For
56-0673937	Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HENDRICKS, JOHN I JR
21875 S.W. 212 AVENUE
MIAMI, FL 33170-1006

**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, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE CS
NAME HAGER, HAMPTON C JR.
STREET ADDRESS 880 A1A BEACH BLVD., UNIT 6107
CITY-ST-ZIP ST AUGUSTINE, FL 32080

TITLE DP
NAME SMITH, JIM
STREET ADDRESS 5011 LINDSTRON DR.
CITY-ST-ZIP CHARLOTTE, NC 28226

TITLE D
NAME FROST, MIKE
STREET ADDRESS 406 HANES RIDGE ROAD
CITY-ST-ZIP MOORESBORO, NC 28114

TITLE D
NAME LUTZ, JACK
STREET ADDRESS 827 EAST MAIN ST.
CITY-ST-ZIP FOREST CITY, NC 28043

TITLE VP
NAME ICENHOUR, GREG
STREET ADDRESS 1511 SWEETGUM LANE
CITY-ST-ZIP MATTHEWS, NC 28105

TITLE T
NAME HAGER, HAMPTON C III
STREET ADDRESS 15823 KELLY PARK CIRCLE
CITY-ST-ZIP HUNTERSVILLE, NC 28078

**DO NOT WRITE
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: Hampton C. Hager Hampton C. Hager 2/27/07 (704) 394-6913
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #