

2007 FOR PROFIT CORPORATION ANNUAL REPORT

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

02-16-2007 90035 004 ***150.00

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1. Entity Name
RHE HATCO, INC.



Principal Place of Business
**601 MARION DRIVE
GARLAND, TX 75042**

Mailing Address
**601 MARION DRIVE
GARLAND, TX 75042**

40019143



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

01302007 Chg-P CR2E034 (12/06)

4. FEI Number
54-1340865

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
LAVOIE, PAUL
601 MARION DRIVE
GARLAND, TX 75042 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
HOUGH, THOMAS A
601 MARION DRIVE
GARLAND, TX 75042 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HIGGINS, MICHAEL
601 MARION DRIVE
GARLAND, TX 75042 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JONATHAN ALTMAN
12 WELCH AVE., SUITE 2
STOUGHTON, MA 02072 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PAUL J. BOHAN
17 EAST 89TH STREET
NEW YORK, NY 10128 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JACK D. FURST
200 CRESCENT CT., SUITE 1600
DALLAS, TX 75201 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
JOHN R. MUSE
200 CRESCENT CT., SUITE 1600
DALLAS, TX 75201 ☐ Change ☒ Addition

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

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

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:

Thomas A. Hough

THOMAS A. HOUGH

02/01/07

(972) 494-0511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Wayline phone #