2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001156

Entity Name: HAMMER LGC, INC.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4 WEST ENGLISH STREET SAMSON, AL 36477

Current Mailing Address: New Mailing Address:

4 WEST ENGLISH STREET SAMSON, AL 36477

FEI Number: 63-1209731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PRES (X) Change () Addition

Name: HAMMER, GEORGE S Name: HAMMER, GEORGE S

Address: 506 WEST PULLUM STREET PO BOX 166 Address: 506 WEST PULLUM STREET PO BOX 166

City-St-Zip: SAMSON, AL 36477 City-St-Zip: SAMSON, AL 36477

Title: COO () Delete Title: () Change () Addition

 Name:
 PASCOE, MICHAEL C
 Name:

 Address:
 116 GLENCOE WAY
 Address:

 City-St-Zip:
 DOTHAN, AL 36305
 City-St-Zip:

Title: VPO () Delete Title: VP-O (X) Change () Addition

 Name:
 WISE, SAMUEL D
 Name:
 WISE, SAMUEL D

 Address:
 PO BOX 553
 Address:
 PO BOX 553

 City-St-Zip:
 SAMSON, AL 36477
 City-St-Zip:
 SAMSON, AL 36477

Title: C () Delete Title: CFO (X) Change () Addition

Name: HAMMER, LINDA M Name: HAMMER, LINDA M

Address: 506 WEST PULLUM STREET PO BOX 166 Address: 506 WEST PULLUM STREET PO BOX 166

City-St-Zip: SAMSON, AL 36477 City-St-Zip: SAMSON, AL 36477

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: LINDA M. HAMMER CFO 01/13/2009