


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Apr 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # F53658**  
 1. Entity Name  
**HATHAWAY'S LAND SERVICES, INC.**



Principal Place of Business      Mailing Address  
 168 LAKE PEARL DR                  P.O BOX 255  
 LAKE PLACID, FL 33850 US        LAKE PLACID, FL 33862-0255 US

**DO NOT WRITE IN THIS SPACE**



04232008    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>59-2136690</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HATHAWAY, RONALD  
 168 LAKE PEARL DR  
 LAKE PLACID, FL 33852

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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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HATHAWAY, RONALD POB 255 US 27 SOUTH LAKE PLACID, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HATHAWAY, DEBRA POB 255 US 27 SOUTH LAKE PLACID, FL
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 05/15/08-80036-023-150.00

**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:**  **Ronald Hathaway** 4-23-08 863-465-4862  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #