2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002585

AUSTIN, DAVID D

15763 BEACHCOMBLER AVE

FORT MYERS, FL 33908

Name:

Address:

City-St-Zip:

Entity Name: THE HAYES BUILDING COMPANY

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	•	e Of Busiliess.	New Fillicipal Flace	oi Busilless.	
10 BLUFF CLINTON,	CT 06413				
Current Mailing Address:			New Mailing Address:		
10 BLUFF CLINTON,	AVENUE CT 06413				
FEI Number	: 06-0799854	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
2037 WES UNIT B	IATTHEW J III BT FIRST ST ERS, FL 3390				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (HAYES, MATT 3 OLD CAMBR CLINTON, CT	IDGE COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (HAYES, STEP 14 SHORE RD CLINTON, CT	·.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (HAYES, STEP 14 SHORE RD CLINTON, CT	·.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	T () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN D. HAYES VP 03/24/2009