

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005670

Entity Name: HARVEY W. WATT & CO., INC.

FILED
Feb 14, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 20787
ATLANTA, GA 30320

New Principal Place of Business:

475 NORTH CENTRAL
HAPEVILLE, GA 30354

Current Mailing Address:

P.O. BOX 20787
ATLANTA, GA 30320

New Mailing Address:

FEI Number: 58-1873472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Title: C () Delete
Name: HARVEY WOODSON WATT,
Address: 475 N. CENTRAL AVE.
City-St-Zip: HAPEVILLE, GA 30354

Title: P () Delete
Name: HIEBEL, JOHN P
Address: 475 N. CENTRAL AVE.
City-St-Zip: HAPEVILLE, GA 30354

Title: V () Delete
Name: WATT, HARVEY W JR.
Address: 475 N. CENTRAL AVE.
City-St-Zip: HAPEVILLE, GA 30354

Title: STD () Delete
Name: ALSTON, HELEN W
Address: 425 N. CENTRAL AVE.
City-St-Zip: ATLANTA, GA 30354

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN P HIEBEL

PRES

02/14/2007

Electronic Signature of Signing Officer or Director

Date