

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H39275

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** BEST AND HAMMOND, INC.

**Current Principal Place of Business:**

1570 US 27 N.  
AVON PARK, FL 33825

**New Principal Place of Business:**

**Current Mailing Address:**

1570 US 27 N.  
AVON PARK, FL 33825

**New Mailing Address:**

**FEI Number:** 59-2556998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEST, CHARLES J  
90 LAKE TROUT DRIVE  
AVON PARK, FL 33825 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BEST, THEODORE H  
Address: 3421 E. GLENEAGLES DR  
City-St-Zip: AVON PARK, FL 33825

Title: P  
Name: BEST, CHARLES JOHN  
Address: 90 LAKE TROUT DR.  
City-St-Zip: AVON PARK, FL 33825

Title: STD  
Name: BEST, DAVID  
Address: 2355 W BARBEN RD  
City-St-Zip: AVON PARK, FL 33825

I hereby 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 all other like empowered.

SIGNATURE: CHARLES J. BEST

PRES

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date