## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

H90158

(7)

G. W. HATCH, INC.

Principal Place of Business Mailing Address 200 WESTHINSTER DR 2200 MECTHINGTED DO



COCOA FL 32926			COCOA FL 32926				
					<ol> <li>Date Incorporated or Qualified</li> <li>12/16/1985</li> </ol>	3a. Date of La 06/1	st Report <b>3/1995</b>
2. Principal Plac	e of Business	2a. Mailing Address	2a. Mailing Address		4. FLI Number		Applied For
1		56	and the state of t		59-2615135		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired		1.75 Additional Fee Required
City & State		City & State	·		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
Zip 24	Country 25	Z <sub>I</sub> p <b>29</b>	Country 30		8. This corporation has liability for i Florida Statutes IV Yes	<b>M</b> No	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New R	egistered Agen	t
			81	Name			
	, anita J.		82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)	
	COCOA BLVD		83				
COCOA	FL 32922		63				
			84	City		E4 85	Zip Code
SIGNATURE	tgrature, typed or phalod name of registeroids	gent and trin if applicable	(NOTE: Bug stered Ager			DATE	
12.		AND DIRECTORS	13.	T	ADDITIONS/CHANGES TO OFF	ICERS AND DIRI	
TITLE	D	[] DELETE				[] (11	ands [1] woomen
NAME	HATCH, GEORGE W. 2206 WESTMINSTER DR	•	1.2 NAME				
STREET ADDRESS	COCOA FL	l•	13 STREET				
CITY-ST-ZIP TITLE	DST	[ ] DELETE	1.4 CHY-5 2 1 TITLE	11-214		Γ٦ Ch	ange Addition
NAME	HATCH, ANITA J.		2.2 NAME				
STREET ADDRESS	2206 WESTMINSTER DE	<b>}</b> .	23 STREET	ADDRESS			
CITY-ST-ZIP	COCOA FL		2.4 CiTY-5	ST - ZIP			
TITLE		DELETE	3. 1 1/ILE			☐ Ch	ange 🔲 Addition
NAME			3 2 NAME				
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP		F 3 DC 124	3.4 CITY-5	ST-ZIP		T Cr	ange [] Addition
TITLE		DELETE	4. 1 TITLE 4.2 NAME				mage LI Addition
NAME STORET ADDRESS				LADDRESS			
STREET ADORESS			4.4 CITY-				
CITY-ST-ZIP		[] DELETE		<u> </u>	Mary 1, 1941 - 1	CI	ange 🔲 Addition
NAME			52 NAME				
STREET ADDRESS			53 STREF	TADORESS			
COTY-ST-ZiP			5.4 CITY-1	ST-ZIP			
TITLE		DELETE	6. 1 TITLE			☐ C:	nange [] Addition
NAME			6.2 NAME				
STREET ADDRESS				i address			
CITY-S1-ZIP			64 C/TY-	ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and closs not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of thy corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, opportunity an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPETY A PAINTED NAME OF SIGNING OFFICER OR DIRECTOR