## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # H90158**

G. W. HATCH, INC.

Principal Place of Business	Mailing Address
2200 WESTMINSTER DR.	2200 WESTMINSTER DR.

## May 04, 1999 8:00 am Secretary of State

05-04-1999 90092 037 \*\*\*150.00



COCOA FL 32926 COCOA FL 32926 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/16/1985 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 2200 Westminster DR. Not Applicable 59-2615135 26 967 N. \$8.75 Additional Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required COCOA 27 City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 2926 Trust Fund Contribution 28 Country Country 8. This corporation owes the current year Intangible 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HATCH, ANITA J. 82 Street Address (P.O. Box Number is Not Acceptable) 967 N COCOA BLVD COCOA FL 32922 83 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) nd title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE ☐ Change Addition 11 TITLE TITLE HATCH, GEORGE W. 1.2 NAME NAME 2206 WESTMINSTER DR. 1.3 STREET ADDRESS STREET ADDRESS COCOA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 2.1 TITLE DST TITLE HATCH, ANITA J. 2.2 NAME NAME 2206 WESTMINSTER DR. 2.3 STREET ADDRESS STREET ADDRESS COCOA FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition ☐ DELETE that is at some TITLE 5000 FF 64 6.2 NAME of the state of STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.4 CiTY-ST-ZIP

CITY+ST-ZIP

CR2E034 (11/98)