

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J46064

FILED
Feb 28, 2012
Secretary of State

Entity Name: HAMILTON-MASTERS, ASSOCIATES, INC.

Current Principal Place of Business:

1539 CENTER AVE.
HOLLY HILL, FL 321172021 US

New Principal Place of Business:

Current Mailing Address:

1539 CENTER AVE.
HOLLY HILL, FL 321172021 US

New Mailing Address:

FEI Number: 59-2744789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTERS, JOHN M SR
1539 CENTER AVE
HOLLY HILL, FL 32117 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: PD
Name: MASTERS, JOHN M SR
Address: 1539 CENTER AVE.
City-St-Zip: HOLLY HILL, FL 321172021 US

Title: STD
Name: MASTERS, JUDITH A
Address: 1539 CENTER AVE.
City-St-Zip: HOLLY HILL, FL 321172021 US

Title: 1VPD
Name: MASTERS, KIMBERLY M
Address: 2405 THOROUGHbred DRIVE
City-St-Zip: KILLEEN, TX 76549 US

Title: 2VPD
Name: MASTERS, MICHAEL C
Address: 1539 CENTER AVENUE
City-St-Zip: HOLLY HILL, FL 321172021

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: JUDITH A MASTERS

STD

02/28/2012

Electronic Signature of Signing Officer or Director

Date