

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2005 08:00 AM
Secretary of State

DOCUMENT # K50689

1. Entity Name
HAMILTON PRINTING, INC.



Principal Place of Business
C/O LEONARD A. HAMILTON
779 N.E. DIXIE HWY.
JENSEN BEACH, FL 34957

Mailing Address
C/O LEONARD A. HAMILTON
PO BOX 1540
JENSEN BEACH, FL 34958



01242005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0098629

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAMILTON, LEONARD A.
779 NE DIXIE HWY
JENSEN BEACH, FL 34957

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when refiling)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

00000001212225

02/03/05-80043-001 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HAMILTON, LEONARD A.
STREET ADDRESS 779 NE DIXIE HWY
CITY-ST-ZIP JENSEN BCH, FL

TITLE VD
NAME HAMILTON, VINCENT L.
STREET ADDRESS 779 NE DIXIE HWY
CITY-ST-ZIP JENSEN BCH, FL

TITLE VD
NAME LYNCH, TIFFANY, H
STREET ADDRESS 779 NE DIXIE HWY
CITY-ST-ZIP JENSEN BCH, FL

TITLE STD
NAME HAMILTON, NANCY L.
STREET ADDRESS 779 NE DIXIE HWY
CITY-ST-ZIP JENSEN BCH, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/26/05 772 334 0157