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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

K86892

(2)

HATLEY AND THOMPSON, INCORPORTED

Principal Place of Business

2703 NW 98TH WAY
CORAL SPRINGS FL 33065

Mairing Address

CORAL SPRINGS FL 33065



CORAL SPR	INGS FL 33065		CORAL SPRINGS FL 33065								
								<ol> <li>Date Incorporated or Qualifies 05/10/1989</li> </ol>	3a. Da	ite of Last R <b>06/05/1</b>	
2. Principal Plac	ce of Business	2a.	Mailing Address					4. FEI Number		· L	Applied For
21		26						65-0122754			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required	
City & State			City & State					6. Election Campaign Financing		\$5.0	May Be
3		28						Trust Fund Contribution			d to Fees
Zip	Country		Z <sub>i</sub> p		Country			8. This corporation has liability for	or Natangible	tax under s	199.032
4	25	29		30				Florida Statutes 🔲 Y			
	g, Name and Address of Curre	nt Regist	ered Agent			r	1	<ol><li>Name and Address of New</li></ol>	Registere	d Agent	
					81	Name					
HATLEY, JOHN LESLIE					82 Street Addi			(P.O. Box Number is Not Accept	ab e)		
2703 NW 98TH WAY					*-		, redirecte	,	,		
CORAL			83								
					84	City				<b>85</b> 7	ρ Code
	the provisions of Sections 607.050									<u> </u>	
SIGNATURE _	n, and accept the obligations of, Sec signature, typed or printed name of registered ago.	nt and their a:	scoratale (	NOTE BOS		it signature r	tinganeni vii e	· · · · · · · · · · · · · · · · · · ·	ľuA" Ę		
12.	OFFICERS A	ND DIRECT			13.			ADDITIONS/CHANGES TO C	FF CERS AN	and the second second	
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NAME	HATLEY, JOHN LESLIE			- I	2 NAME						
STREET ADDRESS	2703 NW 98TH WAY				3 STREET	ADDRESS					
CITY - ST - ZIP	CORAL SPRINGS FL				1 4 CEV - S	S - Zir²				. <u></u>	
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NAME	THOMPSON, CAROLYN E	•		1	2.2 NAME						
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NAME					6 2 NAME	1.400.01.05					
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does 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 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 Burk 13 if changed, or on an attachment with an address.

SIGNATURE

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

42496 (954)344-5435