

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 # **L08780** (3)

1. Corporation Name

**HANNON ENTERPRISES, INC.**



Principal Place of Business

**%FILINGS, INC.  
3054 LAKE WASHINGTON RD  
MELBOURNE FL 32934**

Mailing Address

**%FILINGS, INC.  
3054 LAKE WASHINGTON RD  
MELBOURNE FL 32934**

2. Principal Place of Business

21 **1110 Highway A1A**

Suite, Apt. #, etc.

22 City & State

23 **Satellite Beach, FL**

Zip

24 **32937**

Country

25 **USA**

2a. Mailing Address

26 **1110 Highway A1A**

Suite, Apt. #, etc.

27 City & State

28 **Satellite Beach, FL**

Zip

29 **32937**

Country

30 **USA**

3. Date Incorporated or Qualified

**08/14/1989**

3a. Date of Last Report

**04/03/1995**

4. FEI Number

**59-3003307**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**HANNON, JAMES  
3054 LAKE WASHINGTON RD.  
MELBOURNE FL 32934**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**1110 Highway A1A**

83

84 City

**Satellite Beach**

**FL**

85 Zip Code

**32937**

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

*James T. Hannon*

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**2/28/96**

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D HANNON, JAMES T**  
STREET ADDRESS **3054 LAKE WASHINGTON RD**  
CITY-ST-ZIP **MELBOURNE FL**

TITLE ☐ DELETE

NAME **D HANNON, THOMAS**  
STREET ADDRESS **3054 LAKE WASHINGTON RD**  
CITY-ST-ZIP **MELBOURNE FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**1110 Highway A1A  
Satellite Beach, FL. 32937**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**1110 Highway A1A  
Satellite Beach, FL. 32937**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

**TS  
DONNA E. HANNON  
1110 Highway A1A  
Satellite Beach, FL. 32937**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☒ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

SIGNATURE:

*James T. Hannon* **James T. Hannon**

**2/28/96**

**(407) 413-0338**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)