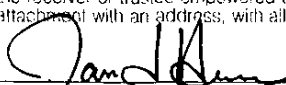


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2008 8:00 am
Secretary of State

02-15-2008 90013 037 ***150.00

DOCUMENT # L08780 1. Entity Name HANNON ENTERPRISES, INC.					
Principal Place of Business 1110 HWY A1A SATELLITE BEACH FL 32937 US			Mailing Address 1110 HIGHWAY A1A SATELLITE BEACH FL 32937 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3003307 ☐ Applied For ☐ Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HANNON, JAMES 1110 HWY A1A SATELLITE BEACH FL 32937				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when changing) Signature, typed or printed name of registered agent and title, if applicable.					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete HANNON, JAMES T 1110 HWY A1A SATELLITE BEACH FL 32937		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition D ☒ Change ☒ Addition HANNON, DONNA E. 1110 HIGHWAY A1A SATELLITE BEACH, FL. 32937	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Delete HARROWSMITH, CINDY A 1110 HWY A1A SATELLITE BEACH FL 32937		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Change ☒ Addition HANNON, DONNA E. 1110 HIGHWAY A1A SATELLITE BEACH, FL. 32937	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Delete WALMA, ROBERT L 1110 HIGHWAY A1A SATELLITE BEACH FL 32937		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: 			JAMES T. HANNON, PRESIDENT 2/07/08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		
321-777-1845			Business Phone #		