

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L84727

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** DR. DAVID A. HATMAKER, P. A.

**Current Principal Place of Business:**

5728 MAJOR BLVD.  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

7601 CONROY-WINDERMERE ROAD  
203  
ORLANDO, FL 32835 US

**Current Mailing Address:**

PO BOX 1354  
WINDERMERE, FL 34786 US

**New Mailing Address:**

**FEI Number:** 59-3015446      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HATMAKER, DAVID A  
8819 LAKE MABEL DRIVE  
ORLANDO, FL 32836 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: HATMAKER, DAVID A.  
Address: 8819 LAKE MABEL DRIVE  
City-St-Zip: ORLANDO, FL 32836

Title: SEC  
Name: HATMAKER, GAIL A  
Address: 8819 LAKE MABEL DR.  
City-St-Zip: ORLANDO, FL 32836

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: DAVID A. HATMAKER

PRES

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date