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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 25 PM 3:19

DOCUMENT # M69427 (6)

1. Corporation Name
THE HANFORD COMPANY, INC.

Principal Place of Business	Mailing Address
2565 SO. OCEAN BLVD. 306N HIGHLAND BEACH FL 33487	2565 SO. OCEAN BLVD. 306N HIGHLAND BEACH FL 33487

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/19/1988
3a. Date of Last Report: 02/22/1994

2. Principal Place of Business	2a. Mailing Address
21 4301 N. OCEAN Blvd.	26 4301 N. Ocean Blvd.
22 Suite, Apt. #, etc. 1603A	27 Suite, Apt. #, etc. 1603A
23 City & State Boca Raton, FL	28 City & State Boca Raton, FL.
24 Zip 33431 25 Country USA	29 Zip 33431 30 Country USA

4. FEI Number: 65-0083464 ☐ 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

DICKENSON, DAVID B.
980 NO. FEDERAL HIGHWAY
SUITE 410
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

01 Name: Thomas J. Hanford
02 Street Address (P.O. Box Number is Not Acceptable): 4301
03
04 City: FL 05 Zip Code

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: _____ DATE:
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPC	1.1 TITLE	☒ Change ☐ Addition DPC
NAME	HANFORD, THOMAS J.	1.2 NAME	HANFORD, Thomas J.
STREET ADDRESS	7028 VALENCIA DR.	1.3 STREET ADDRESS	4301 N. OCEAN Blvd, 1603A
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	Boca Raton, FL. 33431
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(i), 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE: Thomas J. Hanford - Thomas J. Hanford 1/21/95 407 417 0505
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0270102 CP