

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000003431

FILED
Apr 25, 2003
Secretary of State

Entity Name: HAMMER VENTURES, INC.

Current Principal Place of Business:

616 FAIRMONT AVENUE
APT B
SAFETY HARBOR, FL 346954366

New Principal Place of Business:

Current Mailing Address:

PO BOX 15505
CLEARWATER, FL 337665505

New Mailing Address:

FEI Number: 59-3620274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMMER, LUCILLE E
616 FAIRMONT AVENUE
APT B
SAFETY HARBOR, FL 346954366

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: VP () Delete
Name: HAMMER, MICHAEL L
Address: 40 SUNCREST DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VP () Delete
Name: LIKAVEC, TRACY E
Address: 1100 WELLINGTON DRIVE
City-St-Zip: CLEARWATER, FL 33764

Title: VP () Delete
Name: HAMMER, JEFFREY J
Address: 155 SUNCREST DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: PRES () Delete
Name: HAMMER, LUCILLE E
Address: 616 FAIRMONT AVENUE, APT B
City-St-Zip: SAFETY HARBOR, FL 346954366

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SHINDORF, TRACY E
Address: 1100 WELLINGTON DRIVE
City-St-Zip: CLEARWATER, FL 33764

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LUCILLE E HAMMER

PRES

04/25/2003

Electronic Signature of Signing Officer or Director

Date