

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90196 036 ***150.00

DOCUMENT # P00000030310																																																																																																																							
1. Entity Name TEAMHAMMER, INC.																																																																																																																							
Principal Place of Business 2328 E. MAIN STREET LAKELAND, FL 33801			Mailing Address 1023 EUCLID AVE. LAKELAND, FL 33801																																																																																																																				
2. Principal Place of Business SAME		3. Mailing Address 2328 E MAIN STREET																																																																																																																					
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																					
City & State		City & State LAKELAND, FL		4. FEI Number 59-3637583																																																																																																																			
Zip		Country U.S.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																			
6. Name and Address of Current Registered Agent HAMMERBERG, EDWARD JR 1023 EUCLID AVE. LAKELAND, FL 33801				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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when making change)																																																																																																																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees																																																																																																																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>HAMMERBERG, EDWARD JR</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>1023 EUCLID AVE. LAKELAND, FL 33801</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>ST</td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td>VICE PRESIDENT</td> <td style="text-align: right;">☒ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>HAMMERBERG, EDWARD III</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>1023 EUCLID AVE. LAKELAND, FL 33801</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>VP</td> <td style="text-align: right;">☒ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>SCHALTZ, BRADLEY</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>12272 SHARP ROAD LINDEN, MI 48451</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td>SECRETARY / TREASURER</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td>MICHAEL WILSON</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td>916 WOODARD STREET LAKELAND FLORIDA 33803</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	HAMMERBERG, EDWARD JR		STREET ADDRESS			CITY-ST-ZIP	1023 EUCLID AVE. LAKELAND, FL 33801		CITY-ST-ZIP			TITLE	ST	☐ Delete	TITLE	VICE PRESIDENT	☒ Change ☐ Addition	STREET ADDRESS	HAMMERBERG, EDWARD III		STREET ADDRESS			CITY-ST-ZIP	1023 EUCLID AVE. LAKELAND, FL 33801		CITY-ST-ZIP			TITLE	VP	☒ Delete	TITLE		☐ Change ☐ Addition	STREET ADDRESS	SCHALTZ, BRADLEY		STREET ADDRESS			CITY-ST-ZIP	12272 SHARP ROAD LINDEN, MI 48451		CITY-ST-ZIP			TITLE		☐ Delete	TITLE	SECRETARY / TREASURER	☐ Change ☒ Addition	STREET ADDRESS			STREET ADDRESS	MICHAEL WILSON		CITY-ST-ZIP			CITY-ST-ZIP	916 WOODARD STREET LAKELAND FLORIDA 33803		TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 or changed, or on an attachment with an address, with all other like empowered.																																																																																																																							
SIGNATURE: <i>Edward J. Hammerberg</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																							