## 2006 FOR PROFIT CORPORATION

## **FILED** ANNUAL-REPORT May 01, 2006 08:00 AN Secretary of State DOCUMENT # P00000103617 1. Entity Name R.S. HATCHER ENTERPRISES, INC. Principal Place of Business Mailing Address 1216 ENGLISH LANE PO BOX 760 WESTVILLE, FL 32464 GENEVA, AL 36340-0760 CR2E034 (11/05) 01052006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3648788 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent ELLENBURG, LISA DO NOT WRITE 1136 ENGLISH LANE WESTVILLE, FL 32464 IN THIS SPACE 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 | 1 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150,00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE HATCHER, RAYMOND NAME 1216 ENGLISH LANE STREET ADDRESS CiTY -ST-ZiF WESTVILLE, FL 32464 INTLE U00000556936 05/17/06-80032-003 150.00 HATCHER, SHERRY NAME STREET ADDRESS 1216 ENGLISH LANE CHY-SI-7IP WESTVILLE, FL 32464 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

I hereby certify that the information supplied with this filling does not quality 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR