

FILED
Aug 24, 2004 8:00 am
Secretary of State

08-24-2004 90001 004 ***550.00

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000076231

1. Entity Name
H & L BUILDING CONSTRUCTION COMPANY



Principal Place of Business
244 OTTER RUN DR
FERNANDINA BCH, FL 32034

Mailing Address
244 OTTER RUN DR
FERNANDINA BCH, FL 32034

54069647



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08192004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
59-3744683

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HODGES, JAN L
244 OTTER RUN DR
FERNANDINA BCH, FL 32034

Name
HODGES, LARRY
Street Address (P.O. Box Number is Not Acceptable)
244 OTTER Run Dr.

City
Fernandina Bch FL Zip Code
32034

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 *Larry D. Hodges*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8-19-04
DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME DST
HODGES, LARRY ☐ Delete
STREET ADDRESS
CITY-ST-ZIP 244 OTTER RUN DR
FERNANDINA BCH, FL 32034

TITLE
NAME President ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME V
HATZKE, MATTHEW ☒ Delete
STREET ADDRESS
CITY-ST-ZIP 132 WOODHAVEN DRIVE
KINGSLAND, GA 31548

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Larry D. Hodges*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-19-04 (901) 915-3404
Date Daytime Phone #