

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90024 046 ***185.00

DOCUMENT # P02000055263

1. Entity Name
HALL & MAURO HOLDINGS, INC.



Principal Place of Business
**585 MACK BAYOU RD.
SANTA ROSA BEACH, FL 32459**

Mailing Address
**267 ROSEHILL DR. N.
TALLAHASSEE, FL 32312**

DO NOT WRITE IN THIS SPACE



02042008 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0689296	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~GRANGER, ANDREW L~~
~~2004 REMINGTON GREEN CIR STE 4~~
~~TALLAHASSEE, FL 32308~~
Kirk J. Mauro
267 Rosehill Drive North
Tallahassee FL 32312

**DO NOT WRITE
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *X. KJ Mauro*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

2/8/08

DATE

FILE NOW WILL FEE IS \$150.00 + \$25.00
(After May 1, 2008 Fee will be \$550.00)

\$185.00

☐ Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MAURO, DIANE 267 ROSEHILL DR. N. TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MAURO, KIRK 267 ROSEHILL DR. N. TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X. KJ Mauro*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(850)
2/8/08 668-2163
Date Daytime Phone #