

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2007 08:00 AM**  
**Secretary of State**

|  |  |
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| <b>DOCUMENT # P02000125928</b>                                 |  |
| 1. Entity Name<br><b>HANSON FAUCETT &amp; ASSOCIATES, INC.</b> |  |



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| Principal Place of Business<br><b>10961 BONITA BEACH ROAD<br/>BONITA SPRINGS, FL 34135</b> | Mailing Address<br><b>10961 BONITA BEACH ROAD<br/>BONITA SPRINGS, FL 34135</b> |
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01052007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

|   |  |
|---|--|
| 4. FEI Number<br><b>14-1858068</b>  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |

|  |  |                                       |
|--|--|---------------------------------------|
| 6. Name and Address of Current Registered Agent<br><br><b>CORPORATE REGISTERED AGENT, LLC<br/>5147 CASTELLO DRIVE<br/>NAPLES, FL 34103</b> |  | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
|  |  |                                       |

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when retreating) DATE \_\_\_\_\_

|   |  |
|---|--|
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$550.00</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
|---|--|

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|--|--|---|
| <b>10. OFFICERS AND DIRECTORS</b>              |  | <b>DO NOT WRITE<br/>IN THIS SPACE</b><br><br>U000000713508<br>04/26/07-80092-014 150.00 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PS<br>FAUCETT, J. MICHAEL<br>10961 BONITA BEACH ROAD<br>BONITA SPRINGS, FL 34135 |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>FAUCETT, J. MICHAEL<br>10961 BONITA BEACH ROAD<br>NAPLES, FL 34135          |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VSD<br>FAUCETT, SUSAN P<br>10961 BONITA BEACH ROAD<br>NAPLES, FL 34135           |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |   |

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 information.

**SIGNATURE:** \_\_\_\_\_ **4/12/07 (234) 596-3200**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #