


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 07, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000006813</b>	
1. Entity Name H & M TENT AND PARTY RENTAL, INC.	

Principal Place of Business 481 MILLARD GAINEY RD DEFUNIAK SPRINGS, FL 32435	Mailing Address 481 MILLARD GAINEY RD DEFUNIAK SPRINGS, FL 32435
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08022006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 11-3675436	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  HINSON, CHUCK 481 MILLARD GAINEY RD DEFUNIAK SPRINGS, FL 32435
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDOWELL, JEFF 100 WINDING RD DOTHAN, AL 36301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HINSON, CHUCK 481 MILLARD GAINEY RD DEFUNIAK SPRINGS, FL 32435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOLLAND, JEANETTE 5868 CHRISTMAS RD CAMPBELLTON, FL 32428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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08/07/06-80009-005 158.75

**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:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/2/06

888-889-9105

D232

Daytime Phone #