

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90044 050 ***158.75

DOCUMENT # P03000010935	
1. Entity Name SWEENEY HAULING & LAND CLEARING, INC.	

Principal Place of Business 2180 WILLIE PARKER ROAD DEFUNIAK SPRINGS, FL 32433	Mailing Address 2180 WILLIE PARKER ROAD DEFUNIAK SPRINGS, FL 32433
--	--

2. Principal Place of Business 213 Palmetto Avenue	3. Mailing Address 2180 Willie B. Parker Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Niceville, FL	City & State Defuniak Spgs, FL
Zip 32578	Zip 32433
Country U.S.	Country U.S.



01092004 Chg-P CR2E034 (10/03)

4. FEI Number 25-1902666	Applied For ☐ Not Applicable
------------------------------------	--

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

6. Name and Address of Current Registered Agent SWEENEY, HENDAL 2180 WILLIE PARKER ROAD DEFUNIAK SPRINGS, FL 32433	
--	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. the obligations of registered agent. SIGNATURE: <i>Hendal Sweeney</i>	n the State of Florida. I am familiar with, and accept
(instating)	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	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 STREET ADDRESS CITY-ST-ZIP	PST SWEENEY, HENDAL 2180 WILLIE PARKER ROAD DEFUNIAK SPRINGS, FL 32433 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Angela C. Coleman 4662 Ida Coon Ct. Niceville, FL 32578 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. changed, or on an attachment with an address, with all other like empowered.	i), Florida Statutes. I further certify that the information if made under oath; that I am an officer or director d that my name appears in Block 10 or Block 11 if
SIGNATURE: <i>Hendal Sweeney</i>	1/17/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date
	Daytime Phone # 188 267 1570