2004 FOR PROFIT CORPORATION

SIGNATURE:

Apr 13, 2004 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P03000039743** 04-13-2004 90025 013 ***150.00 HAMMER HEAD CONSTRUCTION & DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 114 GOSHAWK TERRACE 114 GOSHAWK TERRACE WINTER SPRINGS, FL 32708 WINTER SPRINGS, FL 32708 3. Mailing Address 2. Principal Place of Business <u>P.O. BOX</u> 196727 Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 04062004 Applied For City & State City & State 4. FEI Number 20-0268533 Not Applicable \$8.75 Additional Zip 5. Certificate of Status Desired 32719 USA Fee Required 6. Name and Address of Current Re 7. Name and Address of New Registered Agent Robert lanchis HODGE, REBECCA L Street Address (P.O. Box Number is Not Acceptable) 114 GOSHAWK TERR WINTER SPRINGS, FL 32708 Sebastian 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 Signature, typed or printed name of registered agent and titl **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ October TITLE P/T/D XI Change ☐ Addition NAME AUGUST, MICHAEL A SR NAME STREET ADDRESS 114 GOSHAWK TERR STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS, FL 32708 CITY-ST-ZIP TITLE CFO Delete TITLE VISID . X Change ☐ Addition Robert T. Yanchis, Jr. YANCHISE, ROBERT NAME NAME STREET ADDRESS 114 GOSHAWK TERRACE STREET ADDRESS 486 Easy St. CITY-ST-ZIP WINTER SPRINGS, FL 32708 CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME HODGE, REBECCA L NAME STREET ADDRESS 114 GOSHAWK TERR STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS, FL 32708 CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

Robert T. Yanchis 51 4-6:04

FILED