


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000097489

1. Entity Name
THE HARTWELL DEVELOPMENT AND CONSTRUCTION COMPANY



Principal Place of Business 804 LAWHON DRIVE JACKSONVILLE, FL 32259	Mailing Address 804 LAWHON DRIVE JACKSONVILLE, FL 32259-9007 US
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DO NOT WRITE IN THIS SPACE



07242006 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0709404	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

**TAYLOR, ELIZABETH H
 804 LAWHON DRIVE
 JACKSONVILLE, FL 32259**

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)

U00000572666
 07/28/06-800006-018 150.00
 DATE

**FILE NOW!!! FEE IS \$150.00
 Due by September 6, 2006**

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

In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD TAYLOR, ELIZABETH H 804 LAWHON DRIVE JACKSONVILLE, FL 32259
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD TAYLOR, ROBERT F 804 LAWHON DRIVE JACKSONVILLE, FL 32259
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Elizabeth H Taylor 7 22 06 904 287 6397

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #