2007 FOR PROFIT CORPORATION ANNUAL REPORT

May 07, 2007 08:00 A Secretary of State DOCUMENT # P03000119423 1. Entity Name JAMES HALE, III, INC. Principal Place of Business Mailing Address **5224 CRYSTAL CREEK DRIVE 5224 CRYSTAL CREEK DRIVE** PACE, FL 32571 PACE, FL 32571 04232007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0376484 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MOORHEAD, STEPHEN R 4300 BAYOU BLVD. SUITE 13 IN THIS SPACE PENSACOLA, FL 32503 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, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE HALE, JAMES N III NAME 000000762167 5224 CRYSTAL CREEK DRIVE STREET ADDRESS 05/25/07::80085-024 CITY-ST-ZIP PACE, FL 32571 TITLE NAME STREET ADDRESS CITY-\$1-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-\$1-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 regelver 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 attachmen with all other like empowered.

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP

FILED