## 2005 FOR PROFIT CORPORATION

## **FILED** ANNUAL REPORT May 02, 2005 08:00 AN **DOCUMENT # P03000139033 Secretary of State** 1. Entity Name CHRIS HINSCH INC Principal Place of Business Mailing Address 3063 SKYCREST DR. 3063 SKYCREST DR. PENSACOLA, FL 32514 PENSACOLA, FL 32514 01142005 CR2E034 (10/03) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 41-2117346 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HINSCH, CHRIS DO NOT WRITE 3063 SKYCREST DR. PENSACOLA, FL 32514 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 \_\_\_\_\_\_\_Signature, typed or primed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstance) DATE \$5.00 May Be \$. Election Campaign Financing FILE NOW!!! FEE IS \$150,00 After May 1, 2005 Fee will be \$550.00 U00000351340 Trust Fund Contribution, Added to Fees 05/02/05-80140-018 150.00 10. OFFICERS AND DIRECTORS TITLE HINSCH, CHRIS NAME STREET ADDRESS 3063 SKYCREST DR. CITY-ST-7/P. PENSACOLA, FL 32514 TITLE STREET ANDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE

12. I hereby certify that the information supplied with this filling 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 807, 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.

NAME STREET ADDRESS CITY-ST-ZIP