

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000148687

1. Entity Name
KEITH HYATT, INC.



Principal Place of Business

**11695 HWY. 60 E.
LAKE WALES, FL 33898**

Mailing Address

**11695 HWY. 60 E.
LAKE WALES, FL 33898**

DO NOT WRITE IN THIS SPACE



02142007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0489528

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HYATT, AMY D
11695 STATE RD 60, E
LAKE WALES, FL 33898**

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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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HYATT, KEITH E
STREET ADDRESS	11695 HWY. 60 E.
CITY-ST-ZIP	LAKE WALES, FL 33898
TITLE	STD
NAME	HYATT, AMY
STREET ADDRESS	11695 HWY. 60 E.
CITY-ST-ZIP	LAKE WALES, FL 33898
TITLE	VD
NAME	RYAN, DANIEL
STREET ADDRESS	11695 HWY 60 E
CITY-ST-ZIP	LAKE WALES, FL 33898
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000678242
04/03/07-80029-015 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Keith E. Hyatt **Keith E. Hyatt** 2/25/07 863-528-2599

Date

Daytime Phone #