

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000154170															
1. Entity Name D.A.D. HATFIELD, INC.															
Principal Place of Business 12304 CORONADO DRIVE SPRING HILL, FL 34609		Mailing Address 12304 CORONADO DRIVE SPRING HILL, FL 34609													
DO NOT WRITE IN THIS SPACE															
6. Name and Address of Current Registered Agent HATFIELD, DANNY 12304 CORONADO DRIVE SPRING HILL, FL 34609		 05012000 No Chg-P CR2E034 (11/05) 4. FFI Number 20-0520048 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required Applied For Not Applicable													
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: _____ 30-day period or period of time of registered agent and not applicable (MUL Registered Agent services required when checked)		DO NOT WRITE IN THIS SPACE													
				9. Election Campaign Financing Initial Fund Contribution ☐ \$5.00 May Be Added In Fees											
10. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td>PSD HATFIELD, DANNY 12304 CORONADO DRIVE SPRING HILL, FL 34609</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td></td> </tr> </table>				TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HATFIELD, DANNY 12304 CORONADO DRIVE SPRING HILL, FL 34609	TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HATFIELD, DANNY 12304 CORONADO DRIVE SPRING HILL, FL 34609														
TITLE NAME STREET ADDRESS CITY-ST-ZIP															
TITLE NAME STREET ADDRESS CITY-ST-ZIP															
TITLE NAME STREET ADDRESS CITY-ST-ZIP															
TITLE NAME STREET ADDRESS CITY-ST-ZIP															
TITLE NAME STREET ADDRESS CITY-ST-ZIP															
12. I hereby certify that the information supplied with this filing does not qualify for the exemption contained in Chapter 199, Florida Statutes. I further certify that the information included on this report or supplementary report is true and accurate and that my signature and name have the same legal effect as if made under oath, that I am an officer or director of the corporation or the registered agent (unpowered) in executing this filing as required by Chapter 007, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or in an attachment with an address, with all other like unpowered. SIGNATURE: <i>Danny Hatfield</i> DANNY HATFIELD, PSD SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: <i>4/28/06</i> 727-863-8323 (Signature Photo)															