2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P03091

1. Entity Name
HURST BOILER AND WELDING COMPANY, INC.

Principal Place of Business	Mailing Address
21971 US HWY 319 N COOLIDGE, GA 31738	PO DRAWER 530 COOLIDGE, GA 31738

DO NOT WRITE IN THIS SPACE

01032008 No Chg-P CR2E034 (11/05)

4. FEI Number
58-1385470

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

U00000774873
01/08/08-80007-016 158.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HURST, CLIFTON E.
STREET ADDRESS	976 CLYDE GRIFFIN RD
CITY-ST-ZIP	THOMASVILLE, GA 31792
TITLE	V
NAME	HURST, THOMAS E
STREET ADDRESS	5340 BAY ROCKY FORD RD.
CITY-ST-ZIP	COOLIDGE, GA 31738
TITLE	T
NAME	HURST, EDNA G.
STREET ADDRESS	976 CLYDE GRIFFIN RD
CITY-ST-ZIP	THOMASVILLE, GA 31792
TITLE	S
NAME	WHITE, THERESA H
STREET ADDRESS	900 CLYDE GRIFFIN RD
CITY-ST-ZIP	THOMASVILLE, GA 31792
TITLE	D
NAME	HURST, HAYWARD L.
STREET ADDRESS	2258 SMITHWICK BRIDGE RD.
CITY-ST-ZIP	FUNSTON, GA 31753
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: Thomas E. Hurst 1-03-08 229-346-3545
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #