

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 24, 2006 08:00 AM
Secretary of State**

DOCUMENT # P04000037075

1. Entity Name

GEORGE W. HATCH TRUCKING, INC.



Principal Place of Business
**2200 WESTMINSTER DRIVE
COCOA, FL 32926**

Mailing Address
**2200 WESTMINSTER DRIVE
COCOA, FL 32926**



04142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

30-0232655

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HATCH, GEORGE W
2200 WESTMINSTER DRIVE
COCOA, FL 32926**

**DO NOT WRITE
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, 2006 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 HATCH, GEORGE W
STREET ADDRESS 2200 WESTMINSTER DRIVE
CITY-ST-ZIP COCOA, FL 32926

TITLE STD
NAME HATCH, ANITA J
STREET ADDRESS 2200 WESTMINSTER DRIVE
CITY-ST-ZIP COCOA, FL 32926

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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000000530702
05/06/06-80010-001 150.00

**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

4/19/06

Date

321-6314686

Daytime Phone #