

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000077610

1. Entity Name
HI BALL CONSTRUCTION, INC.



Principal Place of Business
6287 BRECKENRIDGE CIR.
LAKE WORTH, FL 33467

Mailing Address
6287 BRECKENRIDGE CIR.
LAKE WORTH, FL 33467

FILED
05 SEP 27 AM 11:49
50066867
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09082005

Chg-P

CR2E034 (10/03)

JR 9/20

City & State

City & State

4. FEI Number

74-3123454

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POWELL, VIRGINIA A
6287 BRECKENRIDGE CIR.
LAKE WORTH, FL 33467

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Virginia A. Powell

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/10/05

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
POWELL, VIRGINIA A
6287 BRECKENRIDGE CIR.
LAKE WORTH, FL 33467 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
600060126316
10/03/05--01003--016 **\$58.75 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
V
POWELL, WILLIAM
6287 BRECKENRIDGE CIR.
LAKE WORTH, FL 33467 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, on an attachment with an address, with all other like empowered.

Virginia A. Powell - Agent / Pres. / owner