2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060748

City-St-Zip:

DELRAY BEACH, FL 33483 US

Entity Name: HAMMOND SERVICES & ASSOCIATES, INC.

FILED Jul 19, 2006 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	EDERAL HIGHWA BEACH, FL 33483		3045 N FEDERAL H APT. #10 DELRAY BEACH, FI		
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	EDERAL HIGHWA BEACH, FL 33483		3045 N FEDERAL H APT. #10 DELRAY BEACH, FI		
FEI Number	: 20-2735514 I	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	IAYDEE EDERE ROAD LM BEACH, FL 3	3415 US			
The above in the State	e named entity sub e of Florida.	omits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
	• •	(b), F.S., the corporation did notes that the contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () De HAMMOND, JEFFF 3045 N FEDERAL DELRAY BEACH, F	REY E HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) De HERBERT, JEFFR 3045 N FEDERAL DELRAY BEACH, F	EY HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T (X) De CURTIS, JASON 3045 N FEDERAL		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JEFFREY E HAMMOND P 07/19/2006