

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000121858

1. Entity Name
HAYES-MCKAY, INC.



Principal Place of Business

**5304 S FLORIDA AVE
SUITE 400
LAKELAND, FL 33813**

Mailing Address

**5304 S FLORIDA AVE
SUITE 400
LAKELAND, FL 33813**

DO NOT WRITE IN THIS SPACE



04302008 No Chg-P CR2E034 (11/05)

4. FEI Number
22-3929210

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HAYES, ROBERT M
2104 SELKIRK LANE
LAKELAND, FL 33813**

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HAYES, ROBERT
STREET ADDRESS	2104 SELKIRK LANE
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	DVP
NAME	MCKAY, ROBERT M
STREET ADDRESS	905 MONTROSE DRIVE
CITY-ST-ZIP	GREENSBORO, NC 27410
TITLE	DST
NAME	HAYES, LINDA W
STREET ADDRESS	2104 SELKIRK LANE
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	D
NAME	CAMPA, JOE DE LA
STREET ADDRESS	7660 53RD COURT
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	DONHAM, CHARLES L
STREET ADDRESS	2286 ROYAL TROON CT
CITY-ST-ZIP	ZACHARY, LA 70791
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/27/08-80094-020 150.00

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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: ROBERT M HAYES *Robert M Hayes* **29 APR 08** **863/647-2555**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #