

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90159 037 ***150.00

DOCUMENT # P05000152895

1. Entity Name
HAMLIN MERCER GROUP, INC.



Principal Place of Business
**433 PLAZA REAL
SUITE 275
BOCA RATON, FL 33432**

Mailing Address
**433 PLAZA REAL
SUITE 275
BOCA RATON, FL 33432**

50009438

2. Principal Place of Business

621 NW 53rd Street

3. Mailing Address

621 NW 53rd Street

Suite, Apt. #, etc.

240

Suite, Apt. #, etc.

240

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33487

Country

Zip

33487

Country

03272006

Chg-P

CR2E034 (11/05)

4. FEI Number

20-3827168

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HIBBERD, BLAINE H ESQ.
633 SE 3RD AVENUE
SUITE 301
FORT LAUDERDALE, FL 33301**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☒ Addition

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CITY-ST-ZIP

☐ Change

☐ Addition

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

ALAN LERNER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/06 877-416-7474

Date

Daytime Phone #