## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000021649

Address:

City-St-Zip:

1100 WELLINGTON DRIVE

CLEARWATER, FL 337644767

Entity Name: HAMMER VENTURE GROUP, INC.

FILED Apr 25, 2008 Secretary of State

| Current Principal Place of Business:          |   |                                  | New Principal Place                         | New Principal Place of Business:             |  |
|---|---|----------------------------------|---|--|--|
|   | LINGTON DR<br>ATER, FL 337              |                                  |   |  |  |
| Current Mailing Address:                      |   |                                  | New Mailing Address:                        |  |  |
|   | LINGTON DRI<br>ATER, FL 337             |                                  |   |  |  |
| FEI Number                                    | : 20-4315543                            | FEI Number Applied For()         | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |   |                                  | Name and Address o                          | Name and Address of New Registered Agent:    |  |
| 1100 WEL                                      | LUCILLE E<br>LINGTON DR<br>ATER, FL 337 |                                  |   |  |  |
|   | named entity<br>e of Florida.           | submits this statement for the p | ourpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATUI                                      | RE:                                     |                                  |   |  |  |
|   | Electron                                | nic Signature of Registered Ago  | ent   | Date   |  |
| Election Car                                  | mpaign Financin                         | g Trust Fund Contribution ( ).   |   |  |  |
| OFFICERS AND DIRECTORS:                       |   |                                  | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | HAMMER, MÌC<br>1100 WELLING             |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | HAMMER, LÚC<br>1100 WELLING             |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:                               | VS (<br>SHINDORF, TR                    | Delete<br>ACY E                  | Title:<br>Name:                             | ( ) Change ( ) Addition                      |  |

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: LUCILLE E HAMMER VT 04/25/2008