

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000065796

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** HAMMOCK'S CLEANING SERVICES, INC.

**Current Principal Place of Business:**

4330 SHADOW WOOD TRAIL  
WINTER HAVEN, FL 338801554

**New Principal Place of Business:**

**Current Mailing Address:**

4330 SHADOW WOOD TRAIL  
WINTER HAVEN, FL 338801554

**New Mailing Address:**

**FEI Number:** 14-1962336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HAMMOCK, AMIE  
4330 SHADOW WOOD TRAIL  
WINTER HAVEN, FL 338801554 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: HAMMOCK, FORREST  
Address: 4330 SHADOW WOOD TRAIL  
City-St-Zip: WINTER HAVEN, FL 338801554

Title: PRES  
Name: HAMMOCK, AMIE  
Address: 4330 SHADOW WOOD TRAIL  
City-St-Zip: WINTER HAVEN, FL 338801554

I hereby 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 all other like empowered.

**SIGNATURE:** AMIE HAMMOCK

PRES

03/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date