

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 06, 2006 8:00 am**  
**Secretary of State**

04-06-2006 90020 032 \*\*\*150.00



**DOCUMENT # P94000048472**

1. Entity Name

HANNA PROPERTIES CORP.

Principal Place of Business

2515 E. HANNA AVENUE  
TAMPA FL 33610  
US

Mailing Address

P.O. BOX 9658  
TAMPA FL 33674-658  
US



1st MOORE

CR2E034 (10/05)

2. Principal Place of Business

3. Mailing Address

19910 Gulf Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

401

City & State

City & State

Indian Shores, FL

4. FEI Number

59-3253940

Applied For

Not Applicable

Zip

Country

Zip

33785

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIAMSON, LEON A JR  
2515 E HANNA AVE  
TAMPA FL 33610

Name

Teresa Jurado

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

19910 Gulf Blvd.

Apt. 401

City

Indian Shores

FL

Zip Code

33785

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

Teresa Jurado

Teresa Jurado

3-30-06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00.**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing

Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VPD  
NAME JURADO, JAIME  
STREET ADDRESS C/O 2515 E. HANNA AVE.  
CITY-ST-ZIP TAMPA FL 33610 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD  
NAME PASETTI, LAWRENCE  
STREET ADDRESS C/O 2515 E. HANNA AVE.  
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD  
NAME DAVIDSON, JAMES R  
STREET ADDRESS C/O 2515 E. HANNA AVE.  
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME LOCICERO, ANTHONY  
STREET ADDRESS C/O 2515 E. HANNA AVE.  
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ATD  
NAME SIERRA, FRANK J  
STREET ADDRESS C/O 2515 E. HANNA AVE.  
CITY-ST-ZIP TAMPA FL 33610 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T  
NAME WALKER, FRANKLIN  
STREET ADDRESS C/O 2515 E HANNA AVE  
CITY-ST-ZIP TAMPA FL 33610 ☒ Delete

TITLE T  
NAME Teresa Jurado  
STREET ADDRESS 19910 Gulf Blvd. Apt. 401  
CITY-ST-ZIP Indian Shores, FL 33785 ☒ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Teresa Jurado

3-30-06

(727) 596-7587

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #