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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400062985 (4) HANSON'S DEVELOPMENT, INC.						
Principal Place of Business 700 A1A JUPITER FL 33477		Mailing Address P.O. BOX 3351 TEQUESTA FL 33469-0351				
				3. Date Incorporated or Qualified 08/23/1994	3a. Date of La 04/25/19	
່ ່	lace of Business	2a. Mailing Address		4. FEI Number		Applied For
Suite, Ant.	# etc:	26 Suite, Apt. #, etc.		65-0519722	\$8.7	Not Applicable 75 Additional
2]		27		5. Certificate of Status Desired		e Required
City & Sta	le .	City & State		Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Zip	Country	This corporation has liability for		
]	25	29	30	Florida Statutes [Yes Z No	
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Ro	egistered Agent	
	THKE, CAROLA S ≀A1A			dress (P.O. Box Number is Not Accepta	hla	
	PITER FL 33477			aress (P.O. Box Number is Not Accepta	(DIB)	
			83			
			84 City		FL 85	Zip Code
	to the provisions of Sections 607.0				F La	
office or agent. I a	registered agent, or both, in the Sta am familiar with, and accept the obt	502 and 607.1508, Florida Sta tile of Florida. Such change wa ligations of, Section 607.0505,	itutes, the above-named cor as authorized by the corpora Florida Statutes.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changi ept the appointmen	ing its registered it as registered
GNATURE	Signature, typed or printed name of registered		Itutes, the above-named cor as authorized by the corpora Florida Statutes. NOTE. Registered Agent signature requi		DATE	
GNATURE	Signature. Specifier parallel name of registered OFFICERS A	agent and tille if applicable ()	NOTE. Registered Agent signature requ	uired when reinstating)	DATE	TORS IN 12
GNATURE LE	Signature, by ed or purised name of ruginered OFFICERS A PD RATHKE, RICHARD C	agent and tille if applicable (AND DIRECTORS	NOTE. Registered Agent signature requ 13. 1.1 TILE 12 NAME	uired when reinstating)	DATE CERS AND DIREC	TORS IN 12
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Apr 15 1997 8:00am

Secretary of State