2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000064241

1. Entity Name

WILLIAM E. HAMM AND ASSOCIATES, INC.

Principal Place of Business

1230 DARLINGTON OAK CIRCLE, NE ST. PETERSBURG, FL 33703 Mailing Address

1230 DARLINGTON OAK CIRCLE, NE ST. PETERSBURG, FL 33703

FILED Apr 22, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04012004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3331424

Applied For Not Applicable

5. Certificate of Status Desired

S8.75 Additional Fee Required

813-341-0960

6. Name and Address of Current Registered Agent

SIGNATURE AND TYPE

ARSENAULT, KENNETH G JR. . 10225 ULMERTON ROAD SUITE 2 LARGO, FL 34641

DO NOT WRITE IN THIS SPACE

| 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 | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | | Election Campaign Finan Trust Fund Contribution. | cing: | \$5.00 May Be Added to Fees | 000000123873 04/22/04-80022-012 150.00 |
| 10. OFFICERS AND DIRECTORS | | | | | |
| title Name Street address City-SI-ZIP | D HAMM, WILLIAM E 1230 DARLINGTON OAK CIRCLE, NE SAINT PETERSBURG, FL 33703 | · • | · | | |
| Title Name Street address City-St-Zip | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | | | IN ' | THIS SPACE |
| TRILE NAME STREET ADDRESS CRY-SY-ZIP | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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 trusted 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. | | | | | |