

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000069229

FILED
Jan 06, 2004
Secretary of State

Entity Name: HEDGES CONSTRUCTION, INC.

Current Principal Place of Business:

515 LAKE MARIAM TERR
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

Current Mailing Address:

515 LAKE MARIAM TERR
WINTER HAVEN, FL 33884 US

New Mailing Address:

FEI Number: 59-3349526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMMONS, ROBERT O
1556 SIXTH STREET, S.E.
WINTER HAVEN, FL 33880 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: D () Delete
Name: HEDGES, ROBERT L
Address: 331 LAKE MARIAM BLVD
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: HEDGES, SUSAN B
Address: 331 LAKE MARIAM BLVD
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: HEDGES, ROBERT L JR.
Address: 348 STERLING DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: MERRITT, JASON
Address: 515 LAKE MARIAM TERR
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: MERRITT, NATALIE
Address: 515 LAKE MARIAM TERR
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MERRITT, JASON C
Address: 515 LAKE MARIAM TERR
City-St-Zip: WINTER HAVEN, FL 33884

Title: D (X) Change () Addition
Name: MERRITT, NATALIE H
Address: 515 LAKE MARIAM TERR
City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: JASON C MERRITT

D

01/06/2004

Electronic Signature of Signing Officer or Director

_____ Date