2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P96000000504

Entity Name: HAMMOCK WELDING & FABRICATION, INC.

Current Principal Place of Business:

3602 BOOTBAY RD.
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

117 WEST ALEXANDER ST.
PMB 315
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 59-3359790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAMMOCK, WILLLIAM
3602 BOOTBAY RD.
Y
PLANT CITY, FL 33567 US

Name and Address of New Registered Agent:

HAMMOCK, WILLLIAM
117 W ALEXANDER ST.
315
PLANT CITY, FL 33563 US

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: 04/30/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HAMMOCK, WILLIAM
Address: 3602 BOOTBAY RD.
City-St-Zip: PLANT CITY, FL 33567

Title: D ( ) Delete
Name: HAMMOCK, BARBARA
Address: 3602 BOOTBAY RD.
City-St-Zip: PLANT CITY, FL 33567

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HAMMOCK, WILLIAM
Address: 3602 BOOTBAY RD.
City-St-Zip: PLANT CITY, FL 33567

Title: DVS (X) Change ( ) Addition
Name: HAMMOCK, BARBARA
Address: 117 W. ALEXANDER ST. SUITE 315
City-St-Zip: PLANT CITY, FL 33563

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BARBARA HAMMOCK DVS 04/30/2009
Electronic Signature of Signing Officer or Director — Date