

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000006848

FILED
Jan 19, 2005
Secretary of State

Entity Name: HATMAKER & ASSOCIATES INC.

Current Principal Place of Business:

1156 SOUTH US #1
VERO BEACH, FL 32962 US

New Principal Place of Business:

Current Mailing Address:

1156 SOUTH US #1
VERO BEACH, FL 32962 US

New Mailing Address:

FEI Number: 59-3355088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATMAKER, JOSEPH DELORIS
12650 77TH ST
VERO BEACH, FL 32967 US

Name and Address of New Registered Agent:

HATMAKER, JOSEPH DELORIS
12650 77TH ST
FELLSMERE, FL 32948 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:

01/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HATMAKER, JOSEPH J
Address: 12650 - 77TH STREET
City-St-Zip: FELLSMERE, FL 32948

Title: VP () Delete
Name: HATMAKER, DELORIS C
Address: 12650 - 77TH STREET
City-St-Zip: FELLSMERE, FL 32948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DELORIS C. HATMAKER

VP

01/19/2005

Electronic Signature of Signing Officer or Director

Date