


2005 FOR PROCT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90066 035 ***150.00

DOCUMENT # P960000 0319	
1. Entity Name HATCHER HEAVY EQUIPMENT, INC.	

Principal Place of Business 4335 HUCKLEBERRY LANE SOUTHPORT, FL 32409	Mailing Address 4335 HUCKLEBERRY LANE SOUTHPORT, FL 32409
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40022010



01262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3368339	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HATCHER, ROBERT L 4335 HUCKLEBERRY LANE SOUTHPORT, FL 32409
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**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 _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VT HATCHER, MARY 4335 HUCKLEBERRY LANE SOUTHPORT, FL 32409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC JORGENSEN, DANNY L 4335 HUCKLEBERRY LANE SOUTHPORT, FL 32409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HATCHER, ROBERT L 4335 HUCKLEBERRY LANE SOUTHPORT, FL 32409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD S MILEWSKI, SANDRA 4335 HUCKLEBERRY LANE SOUTHPORT, FL 32409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary Hatcher MARY Hatcher 2-13-05 (850) 2654359
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #