

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000093208**

1. Entity Name  
**HAMMOND STATION GROWERS, INC.**



Principal Place of Business

**P O BOX 310  
SEVILLE, FL 32190**

Mailing Address

**P O BOX 310  
SEVILLE, FL 32190**

**DO NOT WRITE IN THIS SPACE**



01152006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-3410433**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**REGISTER, JAMES M  
160 REGISTER LANE  
SEVILLE, FL 32190**

**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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

|                |                            |
|----------------|----------------------------|
| TITLE          | PD                         |
| NAME           | REGISTER, JAMES M          |
| STREET ADDRESS | REGISTER LANE, P O BOX 310 |
| CITY-ST-ZIP    | SEVILLE, FL 32190          |
| TITLE          | VD                         |
| NAME           | REGISTER, JAMES W JR       |
| STREET ADDRESS | REGISTER LANE, P O BOX 310 |
| CITY-ST-ZIP    | SEVILLE, FL 32190          |
| TITLE          | VD                         |
| NAME           | REDEKER, IMMO H            |
| STREET ADDRESS | REGISTER LANE, P O BOX 310 |
| CITY-ST-ZIP    | SEVILLE, FL 32190          |
| TITLE          | TD                         |
| NAME           | REGISTER, MICHAEL A        |
| STREET ADDRESS | REGISTER LANE, P O BOX 310 |
| CITY-ST-ZIP    | SEVILLE, FL 32190          |
| TITLE          | SD                         |
| NAME           | REGISTER, DAVID W          |
| STREET ADDRESS | REGISTER LANE, P O BOX 310 |
| CITY-ST-ZIP    | SEVILLE, FL 32190          |
| TITLE          |                            |
| NAME           |                            |
| STREET ADDRESS |                            |
| CITY-ST-ZIP    |                            |

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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

**James M Register  
President**

DATE

Daytime Phone #

**1-31-06 386 749 3467**