## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P97000011215

1. Entity Name

H. C. LISTER CORPORATION



FILED Jan 31, 2006 08:00 AM Secretary of State

Principal Place of Business

3968 BOBBIN BROOK CIRCLE TALLAHASSEE, FL 32312-1238 Mailing Address

3968 BOBBIN BROOK CIRCLE TALLAHASSEE, FL 32312-1238



## DO NOT WRITE IN THIS SPACE

01232008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3422866 Applied For Not Applicable

5. Certificate of Status Desired

\$8,75 Additional Fee Required

6. Name and Address of Current Registered Agent

LISTER, CLAUDE E 3968 BOBBIN BROOK CIRCLE TALLAHASSEE, FL 32312-1238

## DO NOT WRITE IN THIS SPACE

		}			
	named entity submits this statement for the pions of registered agent.	urpose of changing its registerer	d office or r	egistered agent, or bo	olt, in the State of Florida. ) am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and file	applicable. (NOTE, Registered	Agent signstum	required when reinstaling)	U0000041T406
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	eing 🗆	\$5.00 May Be Added to Fees	02/10/06-80005-019 150.00
18. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LISTER, CLAUDE E 3958 BOBBIN BROOK CIRCLE TALLAHASSEE, FL 323121238				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LISTER WHITE, EDDIE BELLE 115 LISTER DRIVE WEWAHITCHKA, FL 32465				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BAXLEY, DEBBIE L P.O. BOX 507 WEWAHITCHKA, FL 32465		DO NOT WRITE		
TITLE NAME STREET ADDRESS CHY-ST-ZIP	T LISTER, BENNY C P.O. BOX 1128 WEWAHITCHKA, FL 32465			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME					

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CHY-ST-202

Clarific E. St. President
SIGNATURE AND TYPED OR PRINTED PARE OF SIGNING OFFICER OR DIRECTOR

1-24-06

850 893-4724

Daytime Phone 9