

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000058959

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: HAYCOL, INC.

**Current Principal Place of Business:**

7889 SADDLEBROOK DRIVE  
PORT ST. LUCIE, FL 34986 US

**New Principal Place of Business:**

**Current Mailing Address:**

7889 SADDLEBROOK DRIVE  
PORT ST. LUCIE, FL 34986 US

**New Mailing Address:**

FEI Number: 59-3584313      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

STARKE, LEONARDO D  
3340 MCDONALD STREET  
SUITE A  
MIAMI, FL 33133 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DST ( ) Delete  
Name: HAYWOOD, ROSE M  
Address: 1789 SADDLEBROOK DRIVE  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: V ( ) Delete  
Name: COLLINS, PATSY H  
Address: 2803 ESSEX DRIVE  
City-St-Zip: FORT PIERCE, FL 34946

Title: P ( ) Delete  
Name: HAYWOOD, CHARLES L  
Address: 16144 MARIPOSA CIRCLE NORTH  
City-St-Zip: PEMBROKE PINES, FL 33331

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: ROSE M HAYWOOD

DST

04/29/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date