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Apr 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S70938 (3)
1. Corporation Name
HAYES SHEET METAL WORKS INC.



Principal Place of Business Mailing Address
RT. 1, BOX 4940 RT. 1, BOX 4940
SANTA ROSA BEACH FL 32459 SANTA ROSA BEACH FL 32459

2. Principal Place of Business 2a. Mailing Address
21 76 N. HOLIDAY RD. 26 1054 NELLIE DR
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 DESTIN FL. 28 SANTA ROSA BEACH FL.
Zip Country Zip Country
24 32541 25 32459 29 32459 30

3. Date Incorporated or Qualified 07/31/1991 3a. Date of Last Report 03/19/1996
4. FEI Number 59-3073819 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HAYES, CHARLIE WILLIAM
RT. 1, BOX 4940
SANTA ROSA BEACH FL 32459

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	PD HAYES, CHARLIE WILLIAM	RT. 1, BOX 4940	SANTA ROSA BEACH FL	☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I do 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 annual report or supplemental annual 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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE: CHARLIE HAYES

4/11/97 (94)837-8622

CR2E034 (9/96)