

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V29762

FILED  
Jan 23, 2007  
Secretary of State

Entity Name: THE HALLETT CORPORATION

## Current Principal Place of Business:

2413 24TH WAY  
SARASOTA, FL 34235 US

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 1015  
SARASOTA, FL 34230 US

## New Mailing Address:

FEI Number: 65-0305996

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALLETT, ARTHUR  
2413 24TH WAY  
SARASOTA, FL 34235 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: D ( ) Delete  
Name: HALLETT, ART  
Address: 2413 24TH WAY  
City-St-Zip: SARASOTA, FL

Title: D ( ) Delete  
Name: HALLETT, JILL  
Address: 2413 24TH WAY  
City-St-Zip: SARASOTA, FL

Title: D ( ) Delete  
Name: PATE, J. FOSTER  
Address: 1821 BROCKTON PLACE  
City-St-Zip: FRANKLIN, TN 37064

Title: D ( ) Delete  
Name: BURNS, GINA  
Address: 6753 COUNTRY RD  
City-St-Zip: SARASOTA, FL 34241

## 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:

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: ART HALLETT

D

01/23/2007

Electronic Signature of Signing Officer or Director

Date