

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000011886

**Entity Name:** PADMORE & HAMILTON, INC.

**Current Principal Place of Business:**

4134 GAMBLE RD.  
LLOYD, FL 32337

**Current Mailing Address:**

P.O. BOX 272  
LLOYD, FL 32337

**FEI Number:** 27-1544914

**Certificate of Status Desired:** Yes

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

HAMILTON, FRANKLIN  
4134 GAMBLE RD.  
LLOYD, FL 32337 US

*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

**Officer/Director Detail :**

Title	VP/T	Title	P/S
Name	HAMILTON, FRANKLIN	Name	HAMILTON, LYNETTE P
Address	4134 GAMBLE RD.	Address	4134 GAMBLE RD.
City-State-Zip:	LLOYD FL 32337	City-State-Zip:	LLOYD FL 32337

*I hereby 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 all other like empowered.*

**SIGNATURE:** LYNETTE PADMORE-HAMILTON

**PRESIDENT**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date