


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 10, 2006 08:00 AM
Secretary of State

| | |
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| DOCUMENT # F95000006251 1. Entity Name HEWITT & DASHER, INC. |  |
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| Principal Place of Business 411 SOUTH MAIN ST HINESVILLE, GA 31313 | Mailing Address 411 SOUTH MAIN ST HINESVILLE, GA 31313 |
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01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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|---|---------------------------------------|
| 4. FEI Number 59-3282209 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent HEWITT, GREG 2294 MAYPORT RD #25 ATLANTIC BCH, FL 32233 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-filing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1100000428325
02/21/06-80044-003 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PS DASHER, ALAN 922 TIMBERLAND CT. PONTE VEDRA BEACH, FL 32082 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VP HEWITT, GREG 911 TINBERWALK CT. PONTE VEDRA BEACH, FL 32082 |
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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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2/7/06 Day/Time Phone #