

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000119415

**Entity Name:** HALLMARK PORTABLE BUILDINGS, INC.

**Current Principal Place of Business:**

C/O JACKY GRANT  
2843 HWY 90  
PONCE DE LEON, FL 32455

**Current Mailing Address:**

C/O JACKY GRANT  
P.O. BOX 337  
PONCE DE LEON, FL 32455

**FEI Number:** 30-0046672

**Certificate of Status Desired:** No

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

GRANT, JACKY  
2841 HWY 90  
PONCE DE LEON, FL 32455 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 PD  
Name GRANT, JACKY L  
Address PO BOX 337  
City-State-Zip: PONCE DE LEON FL 32455

Title D  
Name GRANT, MARGARET T  
Address PO BOX 337  
City-State-Zip: PONCE DE LEON FL 32455

*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:** JACKY GRANT

PD

04/17/2015

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

\_\_\_\_\_  
Date