


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # V02930 1. Entity Name MAGNUM SPRAY EQUIPMENT, INC.	
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Principal Place of Business 5148 113TH AVE CLEARWATER, FL 33760 US	Mailing Address 5148 113TH AVE CLEARWATER, FL 33760 US
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01132005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3105168	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HEDGER, JAMES E J  
5148-113TH AVE  
CLEARWATER, FL 33760

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDGER, JAMES E., SR. 5148-113TH AVE CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDGER, JAMES E., JR. 5148-113TH AVE CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDGER, JOSEPH P. 5148-113TH AVE CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDGER, PETER G. 5148-113TH AVE CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDGER, JOHN C. 5148-113TH AVE CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDGER, THOMAS A. 5148-113TH AVE CLEARWATER, FL 33760

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 01/20/05-80044-010 158.75

**DO NOT WRITE IN THIS SPACE**

12. I 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 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:  **JAMES E. HEDGER, JR.** 1/13/05 (727) 573-2955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #