

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 242724 (3)

1. Corporation Name
L.M. HUGHEY COMPANY.



Principal Place of Business: 205 SOUTH HOOVER STREET TAMPA FL 33609
Mailing Address: 205 SOUTH HOOVER STREET TAMPA FL 33609

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/09/1960	3a. Date of Last Report 05/01/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-0943571	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
HUGHEY, L M 205 SOUTH HOOVER STREET TAMPA FL 33609		81	Name		
		82	Street Address (P.O. Box Number is Not Acceptable)		
		83			
		84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HURST, HARRY	1.2 NAME	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	205 SOUTH HOOVER ST.	1.3 STREET ADDRESS	205 S. Hoover St # 400
CITY - ST - ZIP	TAMPA, FL 00000	1.4 CITY - ST - ZIP	TAMPA FL 33609
TITLE	T	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAWLINS, WANITA M.	2.2 NAME	
STREET ADDRESS	205 S. HOOVER ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL	2.4 CITY - ST - ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTER, SHIRLEY H	3.2 NAME	
STREET ADDRESS	205 SOUTH HOOVER ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA, FL 00000	3.4 CITY - ST - ZIP	
TITLE	PD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGHEY, MIKE L.	4.2 NAME	
STREET ADDRESS	205 SOUTH ST.	4.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA, FL 00000	4.4 CITY - ST - ZIP	
TITLE	ASD	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWNE, DAN	5.2 NAME	
STREET ADDRESS	205 S. HOOVER ST.	5.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 and changed, or on an attachment with an address.

SIGNATURE: Dan Browne U-P 4/26/96 813 286 2323
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
DAN BROWNE

CR2E034 (12/95)