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Feb 24 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 280467 (2)  
1. Corporation Name  
HUSMANN & CO.



Principal Place of Business Mailing Address  
602 S.W. PINE TREE LANE 602 S.W. PINE TREE LANE  
PALM CITY FL 34990 PALM CITY FL 34990  
US US

3. Date Incorporated or Qualified 04/14/1964  
3a. Date of Last Report 05/01/1996  
4. FEI Number 59-1036581 Applied For Not Applicable  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address  
21 26  
Suite Apt. # etc. Suite Apt. #, etc.  
22 27  
City & State City & State  
23 28  
Zip Country Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
MARGARET HUSMANN  
625 N. RIVER DR. #102  
STUART FL 34994

10. Name and Address of New Registered Agent  
81 Name CORYNNE H. CARTER  
82 Street Address (P.O. Box Number is Not Acceptable) 602 S.W. PINE TREE LANE  
83  
84 City PALM CITY FL 85 Zip Code 34990

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: *Corynne H. Carter* CORYNNE H. CARTER 2/18/97  
DATE

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY- ST- ZIP  
P MARTHA H. DOBES 2898 RIVERMEADE DR NW ATLANTA GA  
VT CORYNNE H. CARTER 602 S.W. PINE TREE LN PALM CITY FL  
D DOBES, WILLIAM L 2898 RIVERMEADE DR., N.W. ATLANTA GA 30327  
S HUGO A. CARTER 602 S.W. PINE TREE LN PALM CITY FL  
D MARGARET C. HUSMANN 625 RIVER DR. STUART FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP  
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP  
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP  
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP  
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP  
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP

14. I do 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 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 if changed, or on an attachment with an address.

SIGNATURE: *MARGARET C. HUSMANN* MARGARET C. HUSMANN 2-18-97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)