

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. McWhorter Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 290556

(0)

1. Corporation Name
FLORIDA CUTTINGS, INC.

Principal Place of Business

2005 SE COVE ROAD
PO DRAWER B
STUART FL 34997
US

Mailing Address

COVE ROAD
PO DRAWER B
STUART FL 34995-0297

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/05/1965

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 P.O. Drawer B

27 Suite, Apt. #, etc.

28 Stuart, FL

29 34995-0297 30 Country

4. FEI Number

59-1061217

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THURLOW, THOMAS H JR
17 MARTIN L KING JR BLVD
STUART FL 34994

10. Name and Address of New Registered Agent

81 Name Eddie Joe Huggins

82 Street Address (P.O. Box Number is Not Acceptable)
2535 Willoughby Blvd.

83

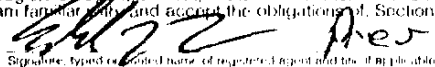
84 City Stuart

FL

85 Zip Code 34994

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



Eddie Joe Huggins

3/2/98

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☒ DELETE
1.2 NAME SD
1.3 STREET ADDRESS FINAN, DONNA
1.4 CITY-ST-ZIP 9106 SE VENUS ST
HOBE SOUND, FL 00000

2.1 TITLE ☐ DELETE
2.2 NAME VTD
2.3 STREET ADDRESS HUGGINS, PRISCILLA
2.4 CITY-ST-ZIP 2015 DOVETAIL TERRACE
PALM CITY FL

3.1 TITLE ☒ DELETE
3.2 NAME PD
3.3 STREET ADDRESS GORVEL, E A
3.4 CITY-ST-ZIP 800 ST LUCIE CRESCENT
STUART, FL 00000

4.1 TITLE ☐ DELETE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ DELETE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ DELETE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Secretary/Treasurer, Director ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1105 Magnolia Bluff
2.4 CITY-ST-ZIP Palm City, FL 34990

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE President, Director ☐ Change ☒ Addition
4.2 NAME Eddie Joe Huggins
4.3 STREET ADDRESS 1105 Magnolia Bluff
4.4 CITY-ST-ZIP Palm City, FL 34990

5.1 TITLE Vice President, Director ☐ Change ☒ Addition
5.2 NAME Ernest Allen Gorvel
5.3 STREET ADDRESS 800 St. Lucie Crescent
5.4 CITY-ST-ZIP Stuart, FL 34994

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or annual statement 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; and that I am duly empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if designated as a registered agent with an address.

SIGNATURE:  2/15/98 (361) 287-1318

CR2E034 (10/97)