

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

FILED

Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **G72561** (5)
1. Corporation Name
THE HUFFORD COMPANY

Principal Place of Business 4400 BAYOU BLVD #35 #208 PENSACOLA FL 32503 US	Mailing Address 4400 BAYOU BLVD #35 #208 PENSACOLA FL 32503 US
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4400 BAYOU BLVD Suite, Apt. #, etc. 22 SUITE 35 City & State 23 PENSACOLA FL Zip 24 32503 Country 25 USA		2a. Mailing Address 26 4400 BAYOU BLVD Suite, Apt. #, etc. 27 SUITE 35 City & State 28 PENSACOLA FL Zip 29 32503 Country 30 USA		3. Date Incorporated or Qualified 11/27/1983	
4. FEI Number 59-2363758		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 HUFFORD, JOHN F. 4900 BAYOU BLVD #208 PENSACOLA FL 32503				10. Name and Address of New Registered Agent 81 Name HUFFORD, JOHN F 82 Street Address (P.O. Box Number is Not Acceptable) 4400 BAYOU BLVD 83 SUITE 35 84 City PENSACOLA FL 85 Zip Code 32503			
--	--	--	--	---	--	--	--

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 **John F. Hufford** **JOHN F. HUFFORD** 1/14/98
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	☐ DELETE		11 TITLE	☐ Change ☐ Addition		
NAME	HUFFORD, JOHN F.			12 NAME			
STREET ADDRESS	4400 BAYOU BLVD #35			13 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL			14 CITY-ST-ZIP			
TITLE	V	☐ DELETE		21 TITLE	☐ Change ☐ Addition		
NAME	PHILPOT, TIM H			22 NAME			
STREET ADDRESS	4400 BAYOU BLVD #35			23 STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL			24 CITY-ST-ZIP			
TITLE		☐ DELETE		31 TITLE	☐ Change ☐ Addition		
NAME				32 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY-ST-ZIP				34 CITY-ST-ZIP			
TITLE		☐ DELETE		41 TITLE	☐ Change ☐ Addition		
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY-ST-ZIP				44 CITY-ST-ZIP			
TITLE		☐ DELETE		51 TITLE	☐ Change ☐ Addition		
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		☐ DELETE		61 TITLE	☐ Change ☐ Addition		
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 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 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 **John F. Hufford** **JOHN F. HUFFORD** 1/14/98 (RSD) 484-9045

CR2E034 (10/97)