

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116833

FILED  
Apr 26, 2008  
Secretary of State

Entity Name: HUTCHINSON DESIGN & CONSTRUCTION, INC.

**Current Principal Place of Business:**

315 PARADISE LANE  
APALACHICOLA, FL 32320

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 306  
APALACHICOLA, FL 32329

**New Mailing Address:**

FEI Number: 59-3688222      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HUTCHINSON, JOSEPH P  
315 PARADISE LANE  
APALACHICOLA, FL 32320      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: HUTCHINSON, JOSEPH P  
Address: P.O. BOX 306  
City-St-Zip: APALACHICOLA, FL 32320

Title: V ( ) Delete  
Name: HUTHINSON, JEAN  
Address: 315 PARADISE LANE  
City-St-Zip: APALACHICOLA, FL 32320

Title: D ( ) Delete  
Name: HUTCHINSON, JOHN V  
Address: 315 PARADISE LN  
City-St-Zip: APALACHICOLA, FL 32320

Title: D ( ) Delete  
Name: HUTCHINSON, EMILY J  
Address: 315 PARADISE LN  
City-St-Zip: APALACHICOLA, FL 32320

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH P. HUTCHINSON

PSTD

04/26/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date