

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000033774 (8)**

1. Corporation Name

B & E HOUCK ENTERPRISES, INC.



Principal Place of Business

Mailing Address

2982 AVIATION WAY
FORT PIERCE FL 34946

2982 AVIATION WAY
FORT PIERCE FL 34946

3. Date Incorporated or Qualified
05/04/1994

3a. Date of Last Report
08/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

4. FEI Number
65-0454436

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HOUCK, ERROL
2982 AVIATION WAY
FORT PIERCE FL 34946**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0532 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 of person named as registered agent (if not applicable)

Signature of Registered Agent (signature procedure not required)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
NAME **PTD HOUCK, BARBARA J**
STREET ADDRESS **2982 AVIATION WAY**
CITY- ST- ZIP **FORT PIERCE FL 34946**

TITLE DELETE
NAME **VSD HOUCK, ERROL**
STREET ADDRESS **2982 AVIATION WAY**
CITY- ST- ZIP **FORT PIERCE FL 34946**

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY- ST- ZIP

1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY- ST- ZIP

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3. STREET ADDRESS
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 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barbara J. Houck

5-1-96

407-489-2285
87

CR2E034 (12/95)