

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2007 08:00 A
Secretary of State

DOCUMENT # P03000091338

1. Entity Name

AUSTIN H. HUTSON, INC.



Principal Place of Business

660 ACACIA AVENUE
MELBOURNE VILLAGE, FL 32904

Mailing Address

660 ACACIA AVENUE
MELBOURNE VILLAGE, FL 32904



03012007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

56-2387653

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUTSON, AUSTIN H
660 ACACIA AVENUE
MELBOURNE VILLAGE, FL 32904

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HUTSON, AUSTIN H
STREET ADDRESS 660 ACACIA AVENUE
CITY-ST-ZIP MELBOURNE VILLAGE, FL 32904

TITLE VS
NAME HUTSON, RACHEL
STREET ADDRESS 660 ACACIA AVENUE
CITY-ST-ZIP MELBOURNE VILLAGE, FL 32904

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U00000693734
04/16/07-80050-022 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Austin H. Hutson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-07

Date

321-427-3380

Daytime Phone #