

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 149969

1. Entity Name
HUGHES, SUPPLY, INC.

FILED

02 JAN 22 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 20 N ORANGE AVE SUITE 200 ORLANDO FL 32801	Mailing Address 20 N ORANGE AVE SUITE 200 ORLANDO FL 32801
---	---

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-0559446	Applied For <input type="checkbox"/> Not Applicable
-----------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--	---

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD HUGHES, DAVID H. 20 N ORANGE AVE, STE 200 ORLANDO FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VB HUGHES, VINCENT S. 20 N. ORANGE AVE., SUITE 200 ORLANDO FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ZEPF, J. STEPHEN 20 N. ORANGE AVE., STE. 200 ORLANDO FL 32801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/C/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUTTERFIELD, BENJAMIN P 20 N ORNAGE AVE, #200 ORLANDO FL 32801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	50000478 P385 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORGAN, THOMAS I 20 N ORANGE AVE., STE. 200 ORLANDO FL 32801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LS <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT/AS Jay Clark 20 N. Orange Ave., Ste. 200 Orlando, FL 32801 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Date: _____ Daytime Phone #: 407-841-4755

Attachment to 2002 UBR
Hughes Supply, Inc.

2003

D

Robert N. Blackford

2931 Nela Avenue
Orlando, FL 32809

D

H. Corbin Day

2001 Park Place, Suite 320
Birmingham, AL 35203

D

John D. Baker II

155 East 21st Street
P.O. Box 4667
Jacksonville, FL 32201

D

William P. Kennedy

4121 SW 34th Street
Orlando, FL 32811

D

Toni Jennings

1030 Wilfried Drive
Orlando, FL 32803

D

Amos R. McMullian

1919 Flowers Circle
Thomasville, GA 31757



303

ACCOUNT NO. : 072100000032

REFERENCE : 804332 7107686

AUTHORIZATION : *Patricia Pizute*

COST LIMIT : \$ 150.00

ORDER DATE : January 21, 2002

ORDER TIME : 2:14 PM

ORDER NO. : 804332-005

CUSTOMER NO: 7107686

CUSTOMER: Laurie Bergstresser, Paralegal
Hughes Supply, Inc.
Suite 200
20 North Orange Avenue
Orlando, FL 32802-2273

RECEIVED
02 JAN 22 AM 8:50
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: HUGHES SUPPLY, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight-EXT#1156

EXAMINER'S INITIALS: _____