## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT #234533** 

## **FILED** Apr 19, 2006 8:00 am Secretary of State 04-19-2006 90105 010 \*\*\*150.00

HUFFSTETLER ENTERPRISES, INC.											
2000 COUNTRY CLUB DRIVE				Mailing Address  2000 COUNTRY CLUB DRIVE EUSTIS, FL 32726 US			# <b>###</b>	, 1 BIES: Elter (1188 III		1361	
Principal Place of Business 3.			3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			)6	Chg-P	CR2E0	34 (11/05)	
City & State			City & State	City & State			mber <b>0882</b>	18		<u> </u>	oplied For ot Applicable
Zip	Country		Zip	Country		5. Certific	ate of S	Status Desired		\$8.75 Add Fee Require	
6. Name and Address of Current Regis			Registered Agent		7. Name	and Ad	dress of New R	tegistered A	gent		
					Name						
HUFFSTETLER, JR. L 10555 RAIN FOREST PLACE ROAL BROOKSVILLE, FL 34601					Street Address (P.O. Box Number is Not Acceptable)						
Shoonering, in a river										7:- 0	
					City			-	FL	Zip Cod	e
	re named entity s ations of register		r the purpose of changing it	s registere	ed office or reg	istered agent, or	both, ir	n the State of Flo	orida. I am I	amiliar with,	and accept
SIGNATURE	Signature, typed or	printed name of registered agent a	and title if applicable. (NO	TE: Registares	d Agent signature re	quired when reinstating	)		DATE		<del></del>
Fii After M	LE NOW!!! F lay 1, 2006 (	EE IS \$150.00 Fee will be \$550.0	9. Election Camp. Trust Fund Cor			\$5.00 May Be Added to Fees					
10.		OFFICERS AND I	DIRECTORS	11.		ADDITIO	VS/CHA	ANGES TO OFF	ICERS AND	DIRECTOR	S IN 11
TITLE	PD		☐ Delete	TITLE						Change	Addition
NAME	ROU, HUFFSTETLER AN			NAME	- 1						
STREET ADDRESS	2000 COUNTRY CLUB DRIVE			STREE	ET ADDRESS						
CITY - ST-ZIP	EUSTIS, FL	32726		CITY-	-ST-ZIP						
TITLE	VD		☐ Delete	TITLE	.					Change	Addition
NAME	HUFFSTET			NAME							
STREET ADORESS		FOREST PLACE			ET ADDRESS						
CITY-ST-ZIP	······	LE, FL 34601		CHY-	ST-ZIP						
TITLE	STD		☐ Delete	TITLE	1					Change	☐ Addition
NAME	1	TLER, L R III EUSTIS BR <i>3695</i>	1-16-	NAME		6955 L	ak.	1/2/0	n		
STREET ADDRESS CITY-ST-ZIP	TAVARES:				T ADDRESS 3	1955 L rand Isl	, , ,				
	CLAVARDO, I				ST-ZIP G	rand 451	a 4 D	FLS	2 /23		
TITLE								,			Addition
NAME	D		☐ Delete	TITLE				,		Change	
	GIRARDIN,		☐ Delete	NAME	,					<b>L</b> Change	
STREET ADDRESS	GIRARDIN, 1	OURT-	Delete	NAME STREE	,					<b>L</b> Change	
STREET ADDRESS CITY-ST-ZIP	GIRARDIN, 1780 PINE GO	OURT-		NAME STREE CITY -	et address st-zip	1 Ridge ebanoa				L <b>M</b> Change	
STREET ADDRESS CITY-ST-ZIP TITLE	GIRARDIN, 1780 PINE GONAPLES, PL	OURT- - 34102 -	☐ Delete	NAME STREE CITY-	et address st-zip					Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	GIRARDIN, 700 PINE OC NAPLES, FL  D WOODBUR	OURT 34102 (, JENNIFER R		NAME STREE CITY- FITLE NAME	ET ADDRESS ST-ZIP					L <b>M</b> Change	
STREET ADDRESS CITY-ST-ZIP TITLE	GIRARDIN, 700 PINE OC NAPLES, FL  D WOODBUR	OURT- 34102 (, JENNIFER R TRY CLUB DRIVE		NAME STREE CITY- FITLE NAME STREE	et address st-zip					L <b>M</b> Change	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	GIRARDIN, 1700 PINE GO NAPLES, FL D WOODBURY 2000 COUNT	OURT- 34102 (, JENNIFER R TRY CLUB DRIVE	☐ Delete	NAME STREE CITY- FITLE NAME STREE CITY-	ET ADDRESS ST-ZIP  ET ADDRESS					☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	GIRARDIN, 1780 PINE OC NAPLES, PL D WOODBURY 2000 COUNT EUSTIS, FL	OURT- 34102 7, JENNIFER R FRY CLUB DRIVE 32726		NAME STREE CITY- FITLE NAME STREE	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP					L <b>M</b> Change	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	GIRARDIN, 1700 PINE GO NAPLES, PL D WOODBURY 2000 COUNT EUSTIS, FL D ROU, ALISO	OURT- 34102 7, JENNIFER R FRY CLUB DRIVE 32726	☐ Delete	NAME STREE CITY- ITILE NAME STREE CITY- ITILE NAME	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP					☐ Change	☐ Addition

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: Dun Hoffetter Rou Pres. Ann Hoffetetler Rou 4/, 1/06 352.483.2880 SIGNATURE AND TYPED OF GRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone /