

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2008 8:00 am**  
**Secretary of State**

04-09-2008 90021 037 \*\*\*150.00

**DOCUMENT # 234533**

1. Entity Name  
**HUFFSTETLER ENTERPRISES, INC.**



Principal Place of Business  
**2000 COUNTRY CLUB DRIVE  
EUSTIS, FL 32726 US**

Mailing Address  
**2000 COUNTRY CLUB DRIVE  
EUSTIS, FL 32726 US**

**40062488**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01282008 Chg-P CR2E034 (12/06)

4. FEI Number

**59-6088218**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HUFFSTETLER, JR. L  
10555 RAIN FOREST ROAD  
BROOKSVILLE, FL 34601**

Name  
**ANN H. ROU**

Street Address (P.O. Box Number is Not Acceptable)  
**2000 COUNTRY CLUB DRIVE**

City  
**EUSTIS**

**FL**

Zip Code  
**32726**

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

*Ann H. Rou* **Ann H. Rou**

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

(NOTE: Registered Agent signature required when reinstating)

**4/7/08**

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME ROU, HUFFSTETLER AN  
STREET ADDRESS 2000 COUNTRY CLUB DRIVE  
CITY-ST-ZIP EUSTIS, FL 32726

TITLE PD ☒ Change ☐ Addition  
NAME ROU, ANN H.  
STREET ADDRESS 2000 COUNTRY CLUB DRIVE  
CITY-ST-ZIP EUSTIS, FL 32726

TITLE VD ☐ Delete  
NAME HUFFSTETLER, L. R. J  
STREET ADDRESS 10555 RAIN FOREST PLACE  
CITY-ST-ZIP BROOKSVILLE, FL 34601

TITLE VD ☒ Change ☐ Addition  
NAME HUFFSTETLER, JR., L. R.  
STREET ADDRESS 10555 RAIN FOREST PLACE  
CITY-ST-ZIP BROOKSVILLE, FL 34601

TITLE STD ☐ Delete  
NAME HUFFSTETLER, L R III  
STREET ADDRESS 36955 LK YALE DR  
CITY-ST-ZIP GRAND ISLAND, FL 32735

TITLE STD ☒ Change ☐ Addition  
NAME HUFFSTETLER, III, L. R.  
STREET ADDRESS 36955 LAKE YALE DRIVE  
CITY-ST-ZIP GRAND ISLAND, FL 32735

TITLE D ☐ Delete  
NAME GIRARDIN, W H  
STREET ADDRESS 41 RIDGE RD  
CITY-ST-ZIP LEBANON, NJ 08833

TITLE D ☒ Change ☐ Addition  
NAME MURRAY, WENDY H.  
STREET ADDRESS 51 RIDGE RD.  
CITY-ST-ZIP LEBANON, NJ 08833

TITLE D ☐ Delete  
NAME WOODBURY, JENNIFER R  
STREET ADDRESS 2000 COUNTRY CLUB DRIVE  
CITY-ST-ZIP EUSTIS, FL 32726

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME ROU, ALISON W.  
STREET ADDRESS 2000 COUNTRY CLUB DRIVE  
CITY-ST-ZIP EUSTIS, FL 32726

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Ann H. Rou* **Ann H. Rou**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/7/08**

DATE

**352483-2886**

DAYTIME PHONE #