**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 271927 1. Corporation Name

HEWITT CONTRACTING COMPANY, INC.

## Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90041 041 \*\*\*150.00



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Principal Place	e of Business	ailing Address											
3839 COUNTY ROAD 48 P O BOX 490697				3839 COUNTY ROAD 48 P O BOX 490697									
LEESBURG FL 34749				LEESBURG FL 34749				DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualifed 07/17/1963					
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For					
21				26				59-1009990 Not Ap			Vot Applicable	]	
Suite, Apt. #, etc.			1	Suite, Apt. #, etc.				\$8.75 Additional					
22			27	27				5. Certificate of Status Desired  Fee Required					
- City & State				City & State				6. Election Campaign Financing \$5.00 May Be					
23			28	28				Trust Fund Contribution Added to Fees					
Zip				Zip Countr				8. This corporation owes the current year Intangible					
24	25			29 30				Personal Property Tax.		Yes	No	4	
	9. Name and Ad	dress of Curren	t Regis	stered Agent				10. Name and Address of New Register	d Age	nt			
			•			81	Name					ł	
HEWITT, HOWARD H. 2908 PORTO BELLO AVENUE							Street Ad	ddress (P.O. Box Number is Not Acceptable)					
LEESBURG FL 32748							_					7	
							- 5		T_	= 7	Code	$\dashv$	
	•					84	City	F	L	-			
office or a	ronistared agent or h	onth in the State (	of Florid	607.1508, Florida State da. Such change was f, Section 607.0505, F	authorize	o bv	tne corpora	ration submits this statement for the purpose is board of directors. I hereby accept the ap	of cha pointme	nging i ent as	ts registered registered		
SIGNATURE													
OIOI4/IIOINE	Signature, typed or printed			<del></del>			t signature requ	when reinstating) DATE	AND	UDEC:	FODE IN 12	<u>۾</u> ۾	
12.		OFFICERS AN	D DIRE		13			ADDITIONS/CHANGES TO OFFICERS		Change		,  ર્	
TITLE	PD			☐ DELETE	1	ITLE				Chang		'  3	
, NAME	HEWITT, HOWARD H.			1.2 N								8	
STREET ADDRESS 2908 PORTO BELLO AVE.							ADDRESS					1	
CITY-ST-ZIP	LEESBURG FL			. 1407			r-ziP			Chana	e	_	
TITLE	ST			☐ DELETE		TLE			٠	Chang	e 🗆 Addition	'  '	
NAME	HEWITT, HOWARD H.			2.2 N/								Ì	
STREET ADDRESS				2.3 ST			ADDRESS					1	
CITY-ST-ZIP	LEESBURG FL		2. 4 CI			T-ZIP			-Chose	A TOTAL MANAGEMENT			
TITLE	ν			DELETE	1	πLE		-	_	†Chang	e Addition	'[	
NAME	HEWITT, SARAH L.			3.2 N									
STREET ADDRESS 2908 PORTO BELLO AVE.				3.3 STREET A			ADDRESS						
CITY-ST-ZIP	LEESBURG FL					CITY-S	T-ZIP			Chang	e Addition	_	
TITLE				☐ DELETE	- 1	MLF			_	Jonany	e Li Addition	Ί.	
NAME						NAME	1						
STREET ADDRESS	il.				4.3	TREET	ADDRESS					1	
CITY-ST-ZIP						CITY-S	T-ZIP			1.Ch	o Dádditio	_	
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NAME	}				1	AME						1	
STREET ADDRESS	<b>;</b>						ADDRESS					-	
CITY-ST-ZIP	<u> </u>					CITY-S	T-ZIP	····		l Charte			
TITLE	1			☐ DELETE		TILE	1		<u>_</u>	] Chang	e	'	
NAME	1					NAME	[						
STREET AROBES	.)				6.3	TREET	ADDRESS					- 1	

14. 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 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, with all other like empowered.

6,4 CITY-ST-ZIP

SIGNATURE:

(352)787-5651