FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 18 1997 8:00am

Secretary of State

407)269-9040

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 342544

(4)

HILLSMAN MODULAR MOLDING, INC.

Principal Place of Business Mailing Address						·····					
895 BUFFALO I		895 BUFFALO RD. TITUSVILLE FL 32796-2601									
							3. Date Incorporated or Qualified 03/06/1969		ate of Last R	leport	
	lace of Business	2a. Mailing Address	a. Mailing Address				4. FEI Number			pplied For	
21 Cuito Act	# 210		26							ot Applicable	
Suite, Apt. 22		Suite, Apt. #, etc.					5. Certificate of Status Desired		, - · · - ·	Additional equired	
City & Stati	C	Crty & State					B. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Ζιρ 29	70 Cou	ntry			This corporation has liability for Florida Statutes	intangible Yes		. 199.032,	
	9. Name and Address of Currer	nt Registered Agent					10. Name and Address of New Ro	<u> </u>			
ROD	NEY HILLSMAN			81	Nam	ė					
4740) MEADOW GREEN RD S FL 32754			82	Stree	t Addre	ess (P.O. Box Number is Not Acceptal	ole)	 .		
ay mark	5 FL 32104			83				<u></u>			
				84	City			FL	85 Zip	Code	
office or r agent Ta	to the provisions of Sections 607.050 egistered agent or both, in the State in familiar with, and accept the oblig	12 and 607.1508, Florida Stat of Florida. Such change wa ations of, Section 607.0505,	tutes, the at is authorized Florida Stat	oove of by utes	name the co	d corporati	oration submits this statement for the pon's board of directors. I hereby acce	VILLUOGO O	i changing it ointment as	ts registered registered	
SIGNATURE	Signature, typied or privide name of registered age	Int and title if applicable (N	IOTE Registered	1 Age	nt signatr	re requiré	d when reinstating)	DATE			
12.	OFFICERS AN	D DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	RS IN 12	
TITLE	VD	☐ DELETE	1.1 10	LE					Change	Addition	
NAME	SPEAR, SHERRY L.		1.2 NA	ME							
\$1REET ADORESS	4109 SPRUCE STREET		1.3 ST	REET	ADDRESS	i					
CITY-ST-2IP	MIMS FL		1.4 Cf		1 - ZIF	ļ					
TITLE	PC	☐ DELETE	2.1 Til						L Change	Addition	
NAME	HILLSMAN, RODNEY A.		2.2 NA								
STREET ADORESS	4740 MEADOW GREEN RD				ADDRESS	3					
CHY-ST-ZIP TITLE	MIMS FL	DELETE	2.4 C		T-ZIP	+			Change	1 4 4 4 1 1 4 4	
NAME	VD	[Decent	3.1 71						L. Change	■ Addition	
STREET ADORESS	HILLSMAN, CYRUS C. 4785 MEADOW GREEN RD		3.2 NA		ADDRESS						
CITY-ST-ZIP	MIMS FL		3.4. C			· [
TITLE	VD	DELETE	4.1 TI		1-215				Change	Addition	
NAME	MYERS, PAMELA K		4. 2 N								
STREET ADDRESS	236 SEMINOLE ST				ADDRESS	,					
CITY-ST-ZIP	TITUSVILLE FL		4.4 CF								
TITLE	ST	DELFTE	5.1 111			†			Change	Addition	
NAME	GILMORE, CHERYL		5.2 NA	ME							
STREET ADDRESS	895 BUFFALO RD		5.3 ST	REET	ADORESS	;					
CITY - ST - ZIP	TITUSVILLE FL		5.4 CF	TY-\$1	(-ZIP						
THTLE		☐ DELETE	6.1 Tt1	LE					Change	Addition	
NAME			6.2 NA	ME							
STREET ADDIRESS			6.3 ST	REET	address	;	•				
CITY-ST-ZIP	NAME OF THE OWNER OWNER OF THE OWNER OWNE		6.4 CI				<u> </u>				
informatio Lam an o	in indicated on this annual report or s fficer or director of the corporation or n Block 12 or Block 13 if changed, o	supplemental annual report is r the receiver or trustee empo	s true and a owered to e iddress.	XOCI	rate ar ute this	nd that	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega as required by Chapter 607, Florida S	il effect as	: if made un	der nath that	