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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 361020

(1)

## THE HUNTINGBURG CORPORATION

FILED May 09 1997 8:00am Secretary of State

# <b>!!!!!! !!!!!!</b>	ANDRA DANKO PROFI		

Principal Place of Business Mailing Address			1 199194 11114 \$1101 11917 \$\$11\$ 11011 \$\$1() 1	temen madet memte demet milit melte ange.		
	ee 2040 virginia ave	% TODD MCGEE 2040 VIRGINIA AVE PO BOX 308				
PO BOX 308 FT. MYERS FL	33902-0308	FT. MYERS FL 33902-0308				
	••••				3. Date Incorporated or Qualified	3a. Date of Last Report
					03/13/1970	06/04/1996
2. Principal I	Place of Business	2a. Maiting Address			4. FEI Number	Applied For
21		26			59-1347251	Not Applicab
Suite, Apt	! #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & Sta ─¬	ite	City & State			6. Election Campaign Financing	\$5.00 May Be
<b>23</b>	Country	28 Zip	Cour	htry.	Trust Fund Contribution	Added to Fees
24	25	29	30	ni y	This corporation has liability for j Florida Statutes	Yes No
241	9. Name and Address of Curre		1301		10. Name and Address of New Re	
HFI	MERICH, FRANK			B1 Name		
	5 RIVERSIDE LANE		1	00 00000	(D.O. Day M. and as in Not Associated	1_3
FORT MYERS FL 33901			Street Ad	dress (P.O. Box Number is Not Acceptab	10)	
	.,		<u> </u>	83		
			<u> </u>	24 04		Ingl. 7 - Anda
			l'	B4 City		FL 85 Zip Code
12.	Signature, typed or printed name of registered ag OFFICERS AN	ID DIRECTORS	13.	Agent eignature ret	pulred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
1016	VD OFFICE 1073	DELETE	1,1 Titu	E	7150770707070707070	Change Addition
NAME	HELMERICH, MICHAEL		1.2 NA	VIE		
STREET ADDRESS	1619 WHISKEY CREEK DR		1.3 STR	EET ADDRESS		
Crty - St - 7IP	FT MYERS, FL 33901		1.4 CIT	Y-ST-ZIP		
Tillf	VD	DELETE	2.1 TIT	.E		Change Additi
NAME	HELMERICH, FRANK		2 2 NAI	VIE		
STHEET ADDRESS			2 3 STF	EET ADDRESS		
CHY-S1-ZiP	FT MYERS, FL 33901	- Doriere		Y-ST-ZIP	· · , , ,	[ ] (No. 1)   1   1   1   1   1   1   1   1   1
TITLE	STD OUNGED MAY	☐ DELETE	3.1 THT			Change L Additi
NAME ONLY ADVOCAGE	OLINGER, MAX 416 FOURTH STREET		3.2 NA	·		
STREET ADORESS	HUNTINBURG, IN 00000		1	EET ADDRESS		
CITY-ST: ZIP	PD PD	DELETE	3.4. CH	Y-ST-ZiP		Change Addition
NAME	OLINGER, LEE RAY	C DETELL	4. 2 NA	·		E change E roote
STREET ADDRESS	AAA PALIATIL ATARET			REET ADDRESS		
CITY - ST - ZIP	HUNTINGBURG, IND 00000		1	Y-ST-ZIP		
THE		DELETE	5.1 TIT		· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Additi
NAME			5.2 NAI	ME .		
STHEET ADDRESS				REET ADDRESS		
CITY SF-7P			1	Y-ST-ZIP		
HILE		DELETE	61 TIT			Change Additi
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 \$75	REET ADDRESS		
CITY-ST ZIF			6.4 CIT	Y-ST-ZIP		

14. I do 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.

SIGNATURE:

RESERVORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14-30-97

941-275-8125

aytime Phone #