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

PROFIT CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(9)

HOFFNER CONSTRUCTION, INC.

FILED Jan 22 1998 8:00am Secretary of State

						<u> </u>
Principal Place of Business Mailing Address					<u> </u>	A BABAA DIBAA BADAA BADAA DIBAA DIBAA AADAA
'		<u>-</u>	•			
414 FAIRLANE ORLANDO FL 32809		3153 TOURAINE AVENUE ORLANDO FL 32812				
US					DO NOT WRITE	IN THIS SPACE
					3. Date Incorporated or Qualified	
					04/03/1974	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					59-1585149	Not Applicable
					5. Certificate of Status Desired	\$8.75 Additional Fee Required
27					& Floriton Coronaina Financia	
23 28					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country				8. This corporation owes or has paid	
24	25	<u>}</u> }	30		Personal Property Tax due June 3	1
	g. Name and Address of Currer	 			10. Name and Address of New Reg	
MIMS, WILLIAM L				1 Name		
320 N MAGNOLIA			8	2 Street Add	ress (P.O. Box Number is Not Acceptable	e)
ORLANDO FL 32801				O COLL FIELD	Toda (1.0. Ben Hamber to Het mooplass	
			8	3		
			8	4 City		85 Zip Code
				J Oily		FL S Zip Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida 8 				by the corpora	poration submits this statement for the pultion's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE Signature, typed or profes harve of registered agent and title if applicable (NOTE:				gent signature requ	red when reinstating)	DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			Change Addition
NAME	HOFFNER (CHARLES F.)		1 2 NAM	Ē		
STREET ADDRESS	· · • · · · · · · · · · · · · · · · ·		1.3 STRE	et address		
CITY-ST-ZIP	ORLANDO FL		1.4 C(TY			
TITLE	D	DELETE	21 TITLE			☐ Change ☐ Addition
NAME (DAWSON (JAMES C.)		2.2 NAME			
STREET ADDRESS	414 FAIRLANE		2.3 STRE	ET ADDRESS		ļ
CITY-ST-ZIP				- ST - ZIP		
THLE	D DELETE		3.1 TITLE			Change Addition
NAME	HOFFNER (CAROL M.)		3.2 NAME			
STREET ADDRESS	3153 TOURAINE AVENUE ORLANDO FL			ET ADDRESS		
CITY-ST-ZIP	OHLANDO PL	T nriete	3.4. CITY			Change
TITLE			4.1 TITLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-			· Change Addition
TITLE		L. DILLIE	5.1 TITLE			C Change C Moulton
NAME CTREET ADDRESS			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE					,.,.,.,.,.,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
NAME		Ottole	61 TITLE 62 NAME			C overife C vanimi
				}		
STREET ADDRESS			1	T ADDRESS		
CITY-\$T-ZIP	ertify that the information supplied w	ith this filing does not qualify for	the ever		Section 119.07(3\(i) Florida Statutes Lf.	urther certify that the information

Indicated on this annual report or supplied will full information to exemption stated in Section 119.07(3)(i), Florida Statutes, 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.