

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 22, 2004 8:00 am
Secretary of State

01-22-2004 90001 025 ***150.00

DOCUMENT # 455162

1. Entity Name
HUTCHINSON ISLAND INN, INC.



Principal Place of Business
3793 N. E. OCEAN BLVD.
JENSEN BEACH, FL 34957 US

Mailing Address
3793 N. E. OCEAN BLVD.
JENSEN BEACH, FL 34957 US

DO NOT WRITE IN THIS SPACE

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01062004 No Chg-P CR2E034 (10/03)

4. FEI Number 73-0964829	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent

GOOGE, JR., HOWARD E
401 EAST OSCEOLA STREET
STUART, FL 34994

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEEDY, MARY L 100 PARK AVE BLDG OKLAHOMA CITY, OK
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DUNCAN, NICHOLAS V 100 PARK AVE OKLAHOMA CITY, OK
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DAN, DENNIS 100 PARK AVE BLDG OKLAHOMA CITY, OK
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JONES, DEADRE V 100 PARK AVE OKLAHOMA CITY, OK
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

L. William Keller, L. William Keller 1/8/04 (772) 225-3000

792-01-40-00