

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 470246

1. Corporation Name  
RONALD T. HOPWOOD, INC.

Principal Place of Business

7373 CIRCLE DRIVE  
LADY LAKE FL 32159

Mailing Address

7373 CIRCLE DRIVE  
LADY LAKE FL 32159

FILED  
Feb 03, 1999 8:00am  
Secretary of State

02-03-1999 90030 020 \*\*\*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1971

4. FEI Number

59-1357731

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

SUMMERS, GARY  
380 W. ALFRED STREET  
TAVARES FL 32778

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME HOPWOOD, RONALD T.  
STREET ADDRESS 7373 CIRCLE DRIVE  
CITY-ST-ZIP LADY LAKE FL

☐ DELETE

TITLE S  
NAME HOPWOOD, SARA E.  
STREET ADDRESS 7373 CIRCLE DRIVE  
CITY-ST-ZIP LADY LAKE FL

☐ DELETE

TITLE V  
NAME HOPWOOD, CAROL A.  
STREET ADDRESS 37 IDAHO AVENUE  
CITY-ST-ZIP WHITEFISH MT

☐ DELETE

TITLE D  
NAME HOPWOOD, ROBERT S.  
STREET ADDRESS 7373 CIRCLE DRIVE  
CITY-ST-ZIP LADY LAKE, FL

☐ DELETE

TITLE D  
NAME HOPWOOD, THOMAS A.  
STREET ADDRESS MAIN AVE  
CITY-ST-ZIP OKAHUMPKA FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

Ronald T. Hopwood  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/99 (352) 753-2471  
Date Daytime Phone #

CR2E034 (11/98)