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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 506339

(1)

HILL ENTERPRISES, INC.

## **FILED** Feb 10 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address					,, e.e., e.e.,	••••	
125 TERRY DRIVE 125 TERRY DRIVE									
PO BOX 2517		PO BOX 2517				TO MOTURE WITHOUT AND ADVOC			
PENSACOLA F	FL 32513	PENSACOLA FL 32513				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
						07/01/1976			
2. Principal Pl	ace of Business	2a, Mailing Address				4. FEI Number		plied For	
21		26	, , , , , , , , , , , , ,			59-2120565		t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b> A Fee Re		
City & State	)	City & State				6. Election Campaign Financing	\$5.00	May Be	
23	28					Trust Fund Contribution	Added to		
Zip	Country	Zψ				8. This corporation owes or has paid the currer	nt year Into	angible	
24	25	29 30				Personal Property Tax due June 30. 🔼 Yes 🔲 No			
	g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Ag	ent		
MC	GRAW, ARTICE L.		18	31	Name				
817 PALAFOX ST.			le le	32	Street Add	ress (P.O. Box Number is Not Acceptable)			
PEN	NSACOLA FL 32501								
			•	33				1	
			E	34	City	FL	<b>65</b> Zip C	Code	
		00 The Control of the Control	100				noncina it	o registered	
11. Pursuant i	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Statute e of Florida. Such change was a	es, the abt authorized	by by	⊪named corp the corpora	poration submits this statement for the purpose of cl tion's board of directors. I hereby accept the appoin	nanging it ntment as	registered	
agent. I a	m familiar with, and accept the oblic	jations of, Section 607.0505, Flo	orida Statu	tes.		, , ,,		_	
SIGNATURE									
	Signature typed or pointed name of registered by	peal and little if applicable (NOTE ND DIRECTORS	E Registered .	Ager	nl signature requi	ired when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND D	IDECTOR	S IN 12	
12.	ST OFFICERS AN	DELETE	1,1 TITLE		$\overline{}$		Change	Addition	
TITLE	HILL, MAUREEN	L. bittit				<u></u>	J DIRECTO		
NAME	400 149410000 01 405			1.2 NAME 1.3 STREET ADDRESS				ļ	
STREET ADDRESS	GULF BREEZE FL	rar ri l'i						İ	
CITY-ST-ZIP	PD	DELETE	1.4 CITY 2.1 TITU		1-ZIP		Change	Addition	
TITLE	HILL, CARLOS 22					_			
NAME	128 WINDSOR PLACE				1000500			Ì	
STREET ADDRESS	GULF BREEZE FL			3 STREET ADDRESS 4 CITY-ST-ZIP					
CITY-ST-ZIP	OOD DICELETE	DELETE 3.			1-ZIP		Change	Addition	
TITLE						_			
NAME			3.2 NAN		ADDRESS				
STREET ADORESS			3.3 SIN						
CITY - ST - ZIP TITLE			4.1 7171	_	JI-ZIP		Change	Addition	
		<u> </u>	4. 2 NA			-	_ •	_ '	
NAME STREET ADDRESS					ADDRESS				
			4.4 CIT		ì				
CITY-ST-ZIP TITLE		DELETE	5.1 TITL		, - ZII		Change	Addition	
NAME		_	5.2 NA						
STREET ADDRESS					ADDRESS				
			5.4 Cit						
CITY-ST-ZIP TITLE		DELETE	6.1 1111		, <u>-</u> P		Change	Addition	
NAME				6.2 NAME					
STREET ADDRESS					ADDRESS				
			6.4 CIT			,			
14. I hereby	14. I hereby cortify that the information supplied with this filing does not qualify for the exidicated on this annual report or supplemental annual report is true and accurate an officer or director of the corporation of the receiver or trudge empowered to execute				tion stated in	Section 119.07(3)(i), Florida Statutes. I further certi	fy that the	information	
indicated officer or	on this annual report or supplemen	tal annual report is true and acc	curate and execute th	i tha nis r	at my signato report as rec	ure shall have the same legal effect as if made unde quired by Chapter 607, Florida Statutes; and that my	∌r oath; tha ⁄ name ap	attam an opears in	

1/30/98

(850) 478-4455