

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 8:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 560627

(2)

1. Corporation Name

HUBER DESIGN AND CONSTRUCTION, INC.

Principal Place of Business

**35 WEST CHURCH STREET
P O BOX 980
ORLANDO FL 32802**

Mailing Address

**35 WEST CHURCH STREET
P O BOX 980
ORLANDO FL 32802**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/16/1978

3a. Date of Last Report

06/01/1994

4. FBI Number

59-1888571

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 has liability for intangible tax under S. 193.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 4405 Vineland Road

2a. Mailing Address

26 4405 Vineland Road

Suite, Apt. #, etc.

22 C-13

Suite, Apt. #, etc.

27 C-13

City & State

23 Orlando, Florida

City & State

28 Orlando, Florida

Zip

24 32811

Country

25 Orange

Zip

29 32811

Country

30 Orange

9. Name and Address of Current Registered Agent

**MCCRAE, JAMES ESQ.
28 E. WASHINGTON ST.
ORLANDO FL 32802**

10. Name and Address of New Registered Agent

81 Name

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

P.O. Box 1969

83

84 City **Orlando**

FL

85 Zip Code **32802**

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 officer 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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **HUBER, DONALD M**
STREET ADDRESS **35 W CHURCH STREET**
CITY - ST - ZIP **ORLANDO, FL 00000**

TITLE **STD**
NAME **HUBER, MARY LOU**
STREET ADDRESS **35 W CHURCH STREET**
CITY - ST - ZIP **ORLANDO, FL 00000**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **4405 Vineland Road, Suite C-13**
1.4 CITY - ST - ZIP **Orlando, FL 32811**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **4405 Vineland Road, Suite C-13**
2.4 CITY - ST - ZIP **Orlando, FL 32811**

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Donald M. Huber

DONALD M. HUBER

4-29-95

407-843-1370

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number