

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # 666964

(2)

1. Corporation Name

HURD & COMPANY, P.A.

Principal Place of Business

**10658 SEMINOLE BLVD
C/O ROBERT L. HURD
SEMINOLE FL 34648-3398
US**

Mailing Address

**10658 SEMINOLE BLVD
SEMINOLE FL 34648-3398
US**



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**STEVENSON KEVIN J
10658 SEMINOLE BLVD
SEMINOLE FL 34648**

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 607.1503, 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 of the person who is the registered agent of the corporation

Signature of the person who is the registered agent of the corporation

(Date)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	HURD, ROBERT L.	
STREET ADDRESS	10658 SEMINOLE BLVD	
CITY-STATE-ZIP	LARGO FL	
TITLE	DS	☐ DELETE
NAME	MEYERS, JOSEPH A II	
STREET ADDRESS	10658 SEMINOLE BLVD.	
CITY-STATE-ZIP	SEMINOLE FL	
TITLE	DP	☐ DELETE
NAME	STEVENSON, KEVIN J	
STREET ADDRESS	10658 SEMINOLE BLVD	
CITY-STATE-ZIP	SEMINOLE FL	
TITLE	VD	☐ DELETE
NAME	RADOSEVICH, JACK E	
STREET ADDRESS	10658 SEMINOLE BLVD.	
CITY-STATE-ZIP	SEMINOLE FL	
TITLE	DT	☐ DELETE
NAME	HAWKINS, THERON D III	
STREET ADDRESS	10658 SEMINOLE BLVD.	
CITY-STATE-ZIP	SEMINOLE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-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 119.07(4)(b), 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 manager 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:

T.D. Hawkins, III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

T.D. HAWKINS, III

3/27/16

(813) 375-1111

CR2E034 (12/95)