

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F05302

(7)

1. Corporation Name

JOHN HART, DISTRIBUTORS, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **11/13/1980** 3a. Date of Last Report **04/26/1994**

4. FEI Number **59-2055264** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

**C/O JOHN W. HART, JR.
HEART RD & GULF TO LK BLVD (P.O. BOX 792)
CRYSTAL RIVER FL 34423
US**

**C/O JOHN W. HART, JR.
HEART RD & GULF TO LK BLVD (P.O. BOX 792)
CRYSTAL RIVER FL 34423
US**

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HART, JOHN W., JR.
HEART RD. & GULF TO LAKE BLVD.
CRYSTAL RIVER FL 34423**

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 fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **JOHN W. HART**
STREET ADDRESS **HEART RD. GULF LAKE BLVD**
CITY - ST - ZIP **CRYSTAL RIVER FL**

1.1 TITLE **ASSISTANT SECRETARY** ☒ Change ☐ Addition
1.2 NAME **JOHN W. HART, JR.**
1.3 STREET ADDRESS **2000 N. HART PATH**
1.4 CITY - ST - ZIP **CRYSTAL RIVER, FL 34429**

TITLE **VP**
NAME **HART, JOHN W., III**
STREET ADDRESS **HEART RD GULF LAKE BLVD.**
CITY - ST - ZIP **CRYSTAL RIVER FL**

2.1 TITLE **DELETE** ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **S**
NAME **HART, PAULINE MARIE**
STREET ADDRESS **HEART RD GULF LAKE BLVD.**
CITY - ST - ZIP **CRYSTAL RIVER FL**

3.1 TITLE **DELETE** ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **PT**
NAME **HIBNER, GWENDOLYN TERRY**
STREET ADDRESS **6359 W PERSHING DR.**
CITY - ST - ZIP **HOMOSASSA FL**

4.1 TITLE **PST** ☒ Change ☐ Addition
4.2 NAME **HIBNER, GWENDOLYN TERRY**
4.3 STREET ADDRESS **5916 W. BIKRE PATH**
4.4 CITY - ST - ZIP **HOMOSASSA, FL 34446**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
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)(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 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: Gwendolyn Terry Hibner Gwendolyn Terry Hibner 4-27-95 904-715-2580
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR (Typed Name) (Typed Name)