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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	Secretary of State DIVISION OF CORPORATI			TIONS	Secretary	of State	e	
1. Corporation		F65116	(8)					
HULLU	WAY GROUP	, ING.						
Principal Place of Business Mailing Address 607 EAST PIKE STREET P.O. BOX 4489			=				DII 01011 01011 11011 01911 1F0	ı
JACKSON CEN	NTER OH 45334		SIDNEY OH 45365 US			DO NOT WRITE IN THE	S SPACE	
						3. Date Incorporated or Qualified 02/01/1982		
'	ace of Business		2a. Mailing Address			4, FEI Number	Applied Fo	
Suite, Apt. 4	#. etc.		Suite, Apt #, etc			59-2164603	Not Applic \$8.75 Additions	
22	., •		27			5. Certificate of Status Desired	Fee Required	11
City & State			City & State			6. Election Campaign Financing	\$5.00 May Be	
23			28	T 0		Trust Fund Contribution	Added to Fees	
Zip 24	25	Country	Z(p)	Count	ry	 This corporation owes or has paid the c Personal Property Tax due June 30. 	current year Intangible Yes No	
		Address of Current R		1001		10. Name and Address of New Registere		
	CORPORATION			8	1 Name			
	0 S. PINE ISLA			8:	2 Street Ac	ddress (P.O. Box Number is Not Acceptable)		
PLA	INTATION FL 3:	5324		8:	3			
				L				
				8-	4 City	F	85 Zip Code	
11. Pursuant to	o the provisions o	of Sections 607.0502 a	ind 607 1508, Florida Statu Florida, Such change was	tes, the abo	ve-named co	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	of changing its register	ed
agent. I ar	n ta miliar with, an	d accept the obligation	nus of, Section 607.0505, F1	orida Statul	es.	yanen a Baara or an estara. Y naraby accept the a	spontation do register	50
SIGNATURE	Signature typed or prof	ed name of registered agent at	nd title diapplication (NO	II : Begistered A	gent Signature to	ecuired when reinstating) DATE		
12.	_	OFFICERS AND D		13.	B	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PT		☐ DELETE	1.1 TITLE			Change Add	ition
NAME	LEASURE, R			1.2 NAME	ſ			
STREET ADDRESS	2356 CO. RD				ET ADDRESS			
CITY-ST-ZIP TITLE	HUNTSVILLE OH		DELETE	1.4 CITY-ST-ZIP 2 1 TITLE			Change Add	dition
NAME	HOLLOWAY, W R			22 NAME			21(10))	
STREET ADDRESS	607 EAST PI	ke st		- 8	ET ADDRESS			
CITY-\$T-ZiP	JACKSON CI	ENTER OH		2. 4 CITY	'-ST-ZIP			
TITLE			☐ DELETE	3.1 TITLE			Change Add	dition
NAME				3.2 NAME				
STREET ADDRESS CITY-ST-ZIP				3 3 STREE	ET ADDRESS			
TITLE			☐ DELETE	41 TITLE			☐ Change ☐ Add	dition
NAME				4 2 NAM	lE .			
STREET ADDRESS				4 3 STREE	ET ADDRESS			
CITY-ST-ZIP			- Opiete	4.4 CITY			The state of the s	
TITLE			☐ DELETE	5.1 TITLE			Change Add	lition
NAME STREET ADDRESS				5.2 NAME	ET ADDRESS			
CITY-ST-ZIP				5.4 CITY-				
TITLE			DELETE	6.1 TITLE			Change Add	ition
NAME				6.2 NAME	F			
STREET ADDRESS					ET ADDRESS			1
CITY-ST-ZIP				6.4 CITY-	-ST-7iP			

14. Thereby 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.

FILED

May 07 1998 8:00am