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FILED  
May 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # G25192 (7)  
1. Corporation Name  
JON HUSTED CONSTRUCTION & DEVELOPMENT, INC.



Principal Place of Business

357 JACKSON AVE.  
GREENACRES FL 33463

Mailing Address

357 JACKSON AVE.  
GREENACRES FL 33463-3317

2. Principal Place of Business

21 14443 HALTER RD

Suite, Apt. #, etc.

22 City & State

23 WELLINGTON, FL

Zip

24 33414

Country

25 PALM BLH

2a. Mailing Address

26 14443 HALTER RD

Suite, Apt. #, etc.

27 City & State

28 WELLINGTON, FL

Zip

29 33414

Country

30 PALM BLH

3. Date Incorporated or Qualified

02/22/1983

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2266597

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. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

HUSTED, JON  
357 JACKSON AVE  
GREENACRES FL 33463

10. Name and Address of New Registered Agent

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 title if applicable

(NOTE: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HUSTED, JON  
STREET ADDRESS 357 JACKSON AVE.  
CITY-ST-ZIP GREENACRES FL

TITLE DV ☐ DELETE

NAME BEHRINGER, MARK  
STREET ADDRESS 14443 HALTER RD  
CITY-ST-ZIP WELLINGTON FL

TITLE D ☐ DELETE

NAME BEHRINGER, DAVID  
STREET ADDRESS 117850 BOTTLE BRUSH CT.  
CITY-ST-ZIP WELLINGTON FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☒ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

33463

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

33414

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

CORRECTION ☐ Change ☐ Addition

13785-0 BOTTLEBRUSH CT.

33414

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 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.

SIGNATURE: Mark D. Behringer

4/29/97 (561)796-1943

CR2E034 (9/96)