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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnach

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

G84872

(2)

| HOLLY | HUGHES INTERIORS, IN | NC. | | | | |
|---|--|--|---|--------------------------------|-------------------|---|
| Principal Place of 2111 BETA 1325 SAN N | | 1325 SAN MARCO | 2111 BETA COURT 1325 SAN MARCO BLVD. S-600 | | | i (Benin ĉeĝi neni enzen leni labla nan anah sidh endu enan anah anan anan |
| ORANGE PARK FL 32073 US | | ORANGE PARK FL 32073 US | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 02/08/1984 04/20/1995 |
| 2. Principal Place of Business | | 2a. Mailing Aridress | 2a. Mailing Andress | | | 4. FEI Number Applied For |
| rs | | 26 | | | | 59-2380356 Not Applicabl |
| Suite, Apt. #, etc. | | Suite Apt. #, etc | | | | 5. Certificate of Status Desired S8.75 Additional Fee Required |
| City 8 State | | 27 | | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Cour | ntry | ·· ··· | 8. This corporation has liability for intangible tax under s 199.032, |
| 24 | 25 | 29 | 30 | . , | | Florida Statutes 🔲 Yes 🔲 No |
| ••• | 9. Name and Address of Curre | | | | | 10. Name and Address of New Registered Agent |
| | | | | В1 | Name | |
| HUGHE | S, F.F. JR. | | | 82 | Street Ad | ddress (F.O. Box Number is Not Acceptable) |
| | ETA COURT | | | | | |
| SUITE | 600 | | | 83 | | |
| ORANG | SE PARK FL 32073 | | | 84 | City | FL 85 Zip Code |
| or registere familiar with | the provisions of Sections R47,055 diagent, or both, in the State of Floring and accept the obligations of Sec | rida. Such change was author shon 607.0505, Florida Statute | ized by the c es | Orp | oranoris is. | poration sutimits this statement for the purpose of changing its registered officiard of directors. I hereby accept the appointment as registered agent. I am |
| 12. | | ND DHECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PD | ☐ DELETE | 1 17 | TLE | | Charige Addition |
| NAME | HUGHES, SUSAN W. | | 1.2 N/ | | | |
| STREET ADDRESS | 2111 BETA COURT | | | | ACIDRESS | |
| CITY - ST - Z-P | ORANGE PARK FL | F Drift | | 2 1 TITLE | | Change |
| TITLE | \$ | ☐ DÉLÉTÉ | | | | C Village C Madden |
| NAME | HUGHES, JR., F. FRANCI | S | | 2.2 NAME 2.3 STREET ADDRESS | | |
| STREET ADDRESS | 3000-1 HARTLEY RD | | | | ST-ZiP | |
| CITY-ST-ZIP TITLE | JACKSONVILLE FL | UNUNOUNILLE I E | | 3 1 10 Lt | | Change Addit or |
| NAME | | | 32 N | | Ì | |
| STREET ADDRESS | | | 4 | | T ADDRESS | |
| CITY-SI-ZIP | | | 340 | HY- | ST - ZIF | |
| TITLE | | ☐ DELFIE | 4 1 1 | HLE | | Change Additio |
| NAME | | | 4 2 N | AME | | |
| STREET ADDRESS | | | 435 | TREE | I ADDRESS | |
| CITY - ST - ZIP | | | 4 4 C | ΙŤΥ | ST-ZIP | |
| TITLE | | ☐ DELETE | 5 11 | IT.E | | Change Additio |
| NAME | | | 5 2 N | AME. | | |
| STREET ADDRESS | | | | | TADDRESS | |
| CITY-ST-7IP | | ED DOLETE | | | ST-ZiP | Change Addit o |
| TITLE | | DELETE | 6.1 | | | |
| NAME | | | 62 N | | | |
| STREET ADDRESS | | | | | ST ZIP | |
| CITY-ST ZIP | L | d . Ith the floor is ushuphain. I | | | | lify for the exemption stated in Section 119 07(3)(k). Florida Statutes further |

I. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.0/13/jik), Florida Statutes. I further certify that the information indicated on this armual 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 employeed 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 en an attachment with an address.

SIGNATURE:

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TO PROPERTY OF THE STATE OF THE ST

May 6, 1996 904 2684545

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