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FILED

Feb 06 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 # H09674 (3)

1. Corporation Name
HOWARD R. HODGE, INC.



Principal Place of Business

3720 NE 112 LANE
ROUTE 1 BOX 1440
ANTHONY FL 32617
US

Mailing Address

3710 NE 112 LANE
ROUTE 1 BOX 1440
ANTHONY FL 32617-9679
US

3. Date Incorporated or Qualified
06/25/1984

3a. Date of Last Report
04/05/1996

2. Principal Place of Business

21 3740 NE 112th Lane
Suite, Apt. #, etc.

2a. Mailing Address

26 3740 NE 112th Lane
Suite, Apt. #, etc.

4. FEI Number

59-2454901

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

22 City & State

23

Zip

24 32617

Country

25 Marion

27 City & State

28 Anthony FL

Zip

29 32617

Country

30 Marion

9. Name and Address of Current Registered Agent

HODGE, HOWARD R.
ROUTE 1, BOX 1440
ANTHONY FL 32617

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	HODGE, HOWARD R.	
STREET ADDRESS	RT. 1 BOX 1440	
CITY-ST-ZIP	ANTHONY FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GOEBEL, JOHN J.	
STREET ADDRESS	RT. 1 BOX 1438	
CITY-ST-ZIP	ANTHONY FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	HODGE, GALE E.	
STREET ADDRESS	RT. 1 BOX 1440	
CITY-ST-ZIP	ANTHONY FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3740 NE 112th Lane
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	3850 NE 112th Lane
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	3740 NE 112th Lane
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

HR Hodge H. R. Hodge

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/97 (352) 622-7336

Day

Daytime Phone #

CR2E034 (9/96)